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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Paradise Cafe South Migmi, L.L.C. (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Herbert Kornblau (Name of Person)		
Paradise Cafe South Migmi, L.L.C.		
12415 Rockledge Cincle		
Boca Rator Florida 3.3428 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Herbert Karn blog at 56/ 305-2253		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
S125.00 Filing Fee Status Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee Certified Copy (additional copy is enclosed)		

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Paradise Cafe, South	Migmi, L.L.C.	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:	
Principal Office Address: 12417 Rockledge Circle Bora Raton, Asbrida 32429	Mailing Address: 12415 Rock ledge Circle Boca Roton, Address 33428	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the results of the resu	Kornbau Kledge Cincle Iress (P.O. Box NOT acceptable) hFL 33428	
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all arformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S AHASSEE PH 12: 0.8 F.S Signature	

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

that the facts stated herein are true.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)