

LD500 0042320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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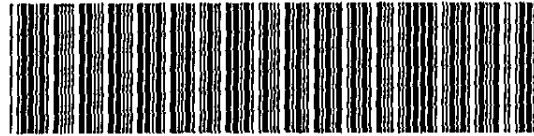
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Brumbley APR 29 2005

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 29 South Eats, 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:

Scott A. Schwartz  
(Name of Person)

c/o Slepian & Schwartz, L.L.C.  
(Firm/Company)

42 Eastbrook Bend  
(Address)

Peachtree City, Georgia 30269  
(City/State and Zip Code)

For further information concerning this matter, please call:

Scott A. Schwartz at ( 404 ) 231-3737  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is **29 SOUTH EATS, L.L.C.**

**ARTICLE II - Address**

The mailing address and street address of the principal office of the L.L.C. is:

Principle Office Address:

29 South Third Street  
Fernandina Beach, FL 32034

Mailing Address:

4855 Ogeechee Drive  
Alpharetta, Georgia 30022

**ARTICLE III - Registered Agent**

The name and the Florida street address of the registered agent are:

Sandra Demby  
606 Date Street  
Fernandina Beach, FL 32034

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*Having been named as registered agent and to accept service of process for the above stated L.L.C. at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

  
Sandra Demby, Registered Agent

#### ARTICLE IV - Managers

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Scott A. Schwartz  
4855 Ogeechee Drive  
Alpharetta, Georgia 30022

MGR

Kari M. Smid  
4855 Ogeechee Drive  
Alpharetta, Georgia 30022

#### REQUIRED SIGNATURE:

Member:

**Impetus Restaurant Group, Inc.**

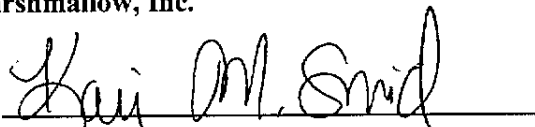
By:   
**Scott A. Schwartz, President**

(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.)

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Member:

**Marshmallow, Inc.**

By:   
**Kari M. Smid, President**

(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.)