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(Requestor's Name)

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(City/State/Zip/Phone #)

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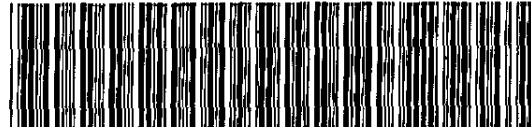
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Brumley MAY 12 2005

BARON & MOORE, P.A.

ATTORNEYS AT LAW

MICHAEL L. MOORE

ARTHUR BARON *†
FLORIDA BOARD CERTIFIED
CIVIL TRIAL LAWYER

* ALSO ADMITTED IN MICHIGAN
† OF COUNSEL

640 N. HILLSIDE AVENUE
ORLANDO, FLORIDA 32803
OFFICE: (407) 894-6447
FAX: (407) 894-0332
WWW.BARONANDMOORE.COM
PLEASE REPLY TO ORLANDO OFFICE

MICHIGAN OFFICE
1101 11TH AVENUE
SUITE 4
MENOMINEE, MI 49858
OFFICE: (906) 863-3600
FAX: (906) 863-3609

May 3, 2005

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

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kafe Kalik Restaurants, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing:

Please return all correspondence concerning this matter to the following:

Michael L. Moore, Esquire
Baron and Moore, P.A.
640 North Hillside Avenue
Orlando, Florida 32803

For further information concerning this matter please call:

Michael L. Moore, Esquire at 407-894-6447

Sincerely,

Michael L. Moore
Michael L. Moore

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TALLAHASSEE, FLORIDA

MLM:mkr
Enclosures: as stated
cc: Mr. Tyrone Nabbie

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

ARTICLE I – Name:

The name of the Limited Liability Company is:

Kafe Kalik Restaurants, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address

9168 Balmoral Mews Square
Windermere, Florida 34786

Mailing Address

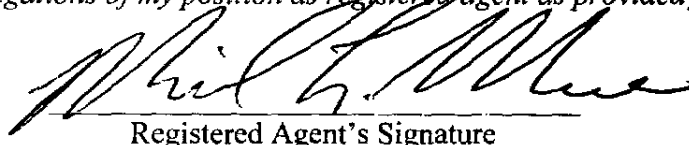
9168 Balmoral Mews Square
Windermere, Florida 34786

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature

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

Michael L. Moore, Esquire
640 North Hillside Avenue
Orlando, Florida 32803

Having been named as registered agent and to accept service of process for above stated limited liability company 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, Florida Statutes.



Registered Agent's Signature

ARTICLE IV – Manager(s) or Managing Member(s)

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

Title:

“MGR” = Manager

“MGRM” = Managing Member

Name and Address:

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TALLAHASSEE, FLORIDA

MGRM

Tyrone Nabbie
9168 Balmoral Mews Square
Winderemere, Florida 34786

MGR

James Katurakes
8521 Billingshurst Place
Orlando, Florida 32825

MGR

Franz Streinesberger
168 Mangrove Bay Ct., Sat. 203
Ocoee, Florida 34761

MGR

Karl Bourne
1730 Blossomwood Lane
Orlando, Florida 32818

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Tyrone W. Nabbie

Typed or printed name of signee

Filing fees enclosed

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy

\$ 5.00 Certificate of Status

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