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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : LES S. KUSHNER, P.A.  
Account Number : I19980000065  
Phone : (954) 342-0250  
Fax Number : (954) 653-1256

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**JAZ FEAST, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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DIVISION OF CORPORATION

*[Handwritten signature]*

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**ARTICLES OF ORGANIZATION**  
**OF**  
**JAZ FEAST, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name:**

The name of the Limited Liability Company is: JAZ FEAST, LLC

**ARTICLE II — Address:**

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

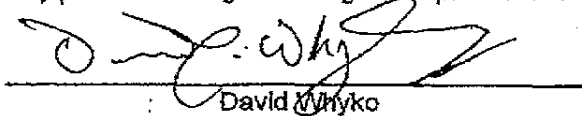
1508 Bay Road, N1443  
Miami Beach, FL 33139

**ARTICLE III — Registered Agent, Registered Office & Registered Agent's Signature:**

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

David Whyko  
1508 Bay Road, N1443  
Miami Beach, FL 33139

*Having been named as registered agent and to accept service of process for the 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, F.S.*

  
David Whyko

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 MAY - 1 AM 11:00

APPROVED  
AND  
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**ARTICLE IV — Management**

The Limited Liability Company will be a manager-managed company, and will be managed by a manager or managers who may be, but are not required to be, a member of the Limited Liability Company. The name and address of the manager who will serve as manager until the first annual meeting of members or until his successor is selected and qualified in accordance with the Operating Agreement or applicable law is:

DAVID WHYKO - 1508 Bay Road, N1443  
Miami Beach, FL 33139

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 28 day of April, 2006.

JAZ FEAST, LLC

By: [Signature]  
David Whyko, Manager

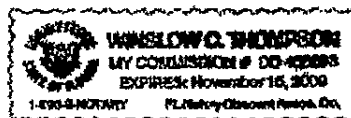
STATE OF FLORIDA )

ss:

COUNTY OF BROWARD )

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the state and county aforesaid to take acknowledgments personally appeared DAVID WHYKO, to me known to be the person described in an who executed the foregoing Articles of Organization as the manager, and he acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the county and state last aforesaid this 28 day of April, 2006.



[Signature]  
NOTARY PUBLIC  
My Commission Expires:

Print Name of Notary: Winslow C. Thompson  
Print Title or Rank: \_\_\_\_\_  
Serial Number of Notary: 20458293

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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