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(Requestor's Name)

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(City/State/Zip/Phone #)

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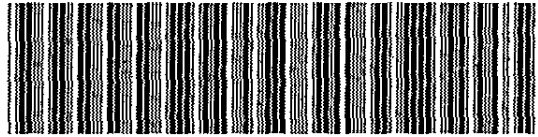
(Business Entity Name)

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LAW OFFICES

**MIERZWA & ASSOCIATES, P.A.**

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SUITE 212  
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July 31, 2006

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Articles of Organization of  
South Florida Menus, L.L.C.  
Our File No. 501560.3738

Dear Sir/Madam:

Enclosed is an original and one copy of the Articles of Organization of South Florida Menus, L.L.C.  
Also, enclosed is this firm's trust account check number 2945 in the amount of \$130.00 which is to  
cover the cost of filing and to obtain a certificate of status.

If you need any additional information, please contact our office.

Sincerely,



Joy L. Hickie  
Legal Assistant to Linda L. Roberts

/jlh  
Enclosures

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**ARTICLES OF ORGANIZATION  
OF  
SOUTH FLORIDA MENUS, L.L.C.**

**ARTICLE I - NAME**

The name of the limited liability company is South Florida Menus, L.L.C., ("company").

**ARTICLE II - ADDRESS**

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

Principal Office Address:

7200 NW 4 Avenue  
Boca Raton, Florida 33487

Mailing Address:


7200 NW 4 Avenue  
Boca Rañon, Florida 33487

**ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Meirzwa & Associates, P.A.  
3900 Woodlake Blvd., Suite 212  
Lake Worth, Florida 33463

*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.*

  
\_\_\_\_\_  
Meirzwa & Associates, P.A.

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TALLAHASSEE, FLORIDA

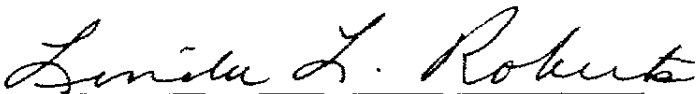
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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY South Florida Menus, L.L.C., SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is South Florida Menus, L.L.C..
2. The name and the Florida street address of the registered agent and office are:  
Meirzwa & Associates, P.A.  
3900 Woodlake Blvd., Suite 212, Lake Worth, Florida 33463

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, Florida Statutes.



Meirzwa & Associates, P.A.  
Registered Agent

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## ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

"MGMR" = Managing Member

Name and Address:

MGMR

Aaron R. Fix  
7200 NW 4 Avenue  
Boca Raton, Florida 33487

### 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.)

Aaron R. Fix

Typed or printed name of signee

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