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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

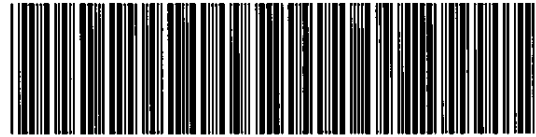
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TALLAHASSEE, FLORIDA
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 048019-005 7518993

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : August 9, 2007

ORDER TIME : 10:42 AM

ORDER NO. : 048019-005

CUSTOMER NO: 7518993

FILED
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

DOMESTIC FILING

NAME: WINGS GONE WILD BRANDON, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
FOR
WINGS GONE WILD BRANDON, LLC
A FLORIDA LIMITED LIABILITY COMPANY

FILED
07 AUG -9 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I-Name:

The name of the Limited Liability Company is:

WINGS GONE WILD BRANDON, LLC

ARTICLE II-Address:

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

**679 Geneva Place
Tampa, Florida 33606**

ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature:

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

**MICHAEL D. DISSER
679 Geneva Place
Tampa, Florida 33606**

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.


MICHAEL D. DISSER

ARTICLE IV-Management

The Limited Liability Company is to be managed by one or more members and is, therefore, a member-managed company.

ARTICLE V-Managing Members(s):


The name and address of the Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGRM	Michael D. Disser 679 Geneva Place Tampa, Florida 33606

ARTICLE VI-Effective Date:

This Limited Liability Company is to become effective upon listing of this certificate with the Secretary of State.

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.


MICHAEL D. DISSER

Dated: 7-30-07