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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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ARTICLES OF ORGANIZATION FOR

Menoli Restaurants LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is Menoli Restaurants LLC.

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is 1988 Alt 19 S. #4, Tarpon Springs, FL 34689.

ARTICLE III: MANAGEMENT

The company will a manager managed Limited Liability Company.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Mendi Ismaili, 1259 Druid Rd., East, Clearwater, FL 33756.

ARTICLE V: MANAGERS

The name and address of the initial Managers of the company are: Mendi Ismaili, Fanol Bojka, 1988 Alt 19 S #4, Tarpon Springs, FL 34689.

The undersigned has executed these Articles of Organization this 5th day of December 2007.

"Your Capital Connection, Inc. by, Leilani White, Client Representative"

Authorized Representative

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sect	ion 607-0501, Florida	Statutes, the mentione	d corporation,
organized under the laws of the sta	te of Florida, submits	the following statement	in designating
the registered office, registered age	nt, in the state of Florid	ia.	

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1.	The	name	of the corpor	ation	n is: <u>Menoli Rest</u>	aurants LLC					
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2.	The	name	and street ad	dres	s of the register	ed agent an	d øffice	is: <u>M</u>	endi Ismail	i, 1259 Dru	id Rd
E.	Clear	water	FL 33756	!							
 H	AVE	BEE	N NAMED	AS	REGISTERE	D AGENT	AND	ТО	ACCEPT	SERVICI	 E OF

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

Merdi Llomali