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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : A.A.ALI, CPA
Account Number : 120000000192
Phone : (407) 298-3900
Fax Number : (407) 298-0660

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SCOOPS AT AVALON, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

S. HAWKES

OCT 20 2008

EXAMINER

~~S. HAWKES~~

JAN 20 2008

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EXAMINER

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

SCOOPS AT AVALON LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

1313 BELLA COOLA DR

ORLANDO, FL 32828

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

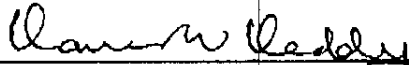
The name and the Florida street address of the registered agent are:

RAMESH REDDY NIMMALA

1313 BELLA COOLA DR

ORLANDO, FL 32828

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..



RAMESH REDDY NIMMALA / 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:

"MGR" = Manager

"MGRM" = Managing Member

RAMESH REDDY NIMMALA, MANAGER

1313 BELLA COOLA DR

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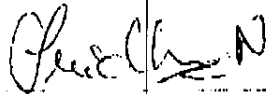
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ORLANDO, FL 32828

SRIDHAR NADIMPALLI, MANAGER
1313 BELLA COOLA DR
ORLANDO, FL 32828

ARTICLE V: Effective date, if other than the date of filing: **OCTOBER 16, 2008**
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

SRIDHAR NADIMPALLI

Typed or printed name of signee

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