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Division of Corporations

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Florida Department of State
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From:

Account Name : HARPER, KYNES, GELLER, GREENLEAF, GRAYMAN, P.A.
Account Number : 070651000745
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**FLORIDA LIMITED LIABILITY CO.
Wild Seafood at John's Pass, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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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: WILD SEAFOOD AT JOHN'S PASS, LLC

ARTICLE II - ADDRESS

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

Jason Delacruz
12124 Lillian Ave.
Largo, FL 33778

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

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

Jason Delacruz
12124 Lillian Ave.
Largo, FL 33778

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.


Jason Delacruz, Registered Agent

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ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager – managed company.

ARTICLE V - MANAGERS

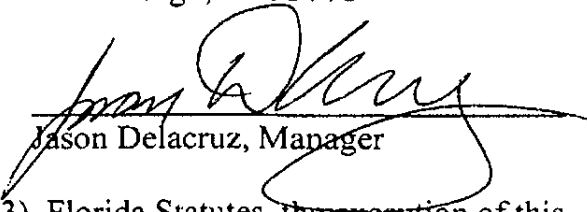
The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Manager

Jason Delacruz
12124 Lillian Ave.
Largo, FL 33778



Jason Delacruz, Manager

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.

Jason Delacruz

Typed or printed name of signee

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