Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160

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Fax Number

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FLORIDA LIMITED LIABILITY CO.

MACARONS ET CHOCOLATS FORT MYERS LLC

Certificate of Status	0
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A. LUNT

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

MACARONS ET CHOCOLATS FORT MYERS LLC

ARTICLE II ADDRESS

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

MIROMAR OUTLETS 10801 CORKSCREW ROAD, STE 183 ESTERO, FLORIDA 33928

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

GUILLEM ROSALIE 1201 LOST CREEK COURT OSPREY, FLORIDA 34229

Having been named as registered agent 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.

GUILLEM ROSALIE / Registered Agent's signature

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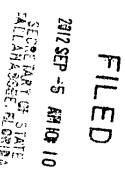
ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS

MANAGING MEMBER
GUILLEM ROSALIE
1201 LOST CREEK COURT
OSPREY, FLORIDA 34229

MANAGING MEMBER
CORDEL HERVE
7 PLACE CHARLES DULLIN
PARIS 75018 FRANCE



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.

GUILLEM ROSALIE