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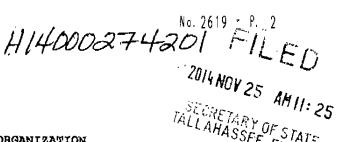
FLORIDA LIMITED LIABILITY CO. FlapjackJohnny's Groveland, LLC

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ARTICLES OF ORGANIZATION

OF

FLAPJACK JOHNNY'S GROVELAND, LLC

ARTICLE I

The name of this Limited Liability Company is FLAPJACK JOHNNY'S GROVELAND, LLC.

ARTICLE II

This limited liability company shall have a perpetual existence commencing on the date these Articles are filed with the Secretary of State for the State of Florida, unless sconer terminated as provided herein.

ARTICLE III FURPOSE

This limited liability company is created for the purpose of transacting all lawful business for which limited liability companies may be organized under the Florida Limited Liability Company Act as agreed upon by the members.

ARTICLE IV PLACE OF BUSINESS AND REGISTERED AGENT

The principal place of business of this limited liability company shall be 7432 State Road 50, Suite 103, Groveland, Florida 34736 or such other place or places as the members from time to time may determine.

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The mailing address of this limited liability company shall be 7432 State Road 50, Suite 103, Groveland, Florida 34736.

The initial Registered Agent of this limited liability company shall be Kevin M. Stone, Stone & Gerken, P.A., 4850 N. Highway 19A, Mount Dora, Florida 32757.

ARTICLE V MANAGEMENT OF THE BUSINESS

This limited liability company shall be a manager-managed The initial manager shall be Amber Kitrinos whose address is 7432 State Road 50, Suite 103, Groveland, Florida 34736. Such manager shall continue to manage this limited liability company until a qualified successor is duly elected by a majority of members.

ARTICLE VI PROPERTY

Real or personal property originally brought into or transferred to the Company, or acquired by the Company by purchase or otherwise, shall be held and owned, and conveyance shall be made, in the name of this limited liability company.

ARTICLE VIT AMENDMENTS

These Articles, except for the vested rights of the members, may be amended from time to time by two-thirds (2/3) majority in interest of the members, and the amendments shall be filed with the Florida Department of State.

IN WITNESS WHEREOF, the parties hereto have executed these Articles of Organization on this (2) day of November, 2014.

Amber Kitrinos, Manager

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STATE OF FLORIDA COUNTY OF LAKE

I REREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Amber Kitrinos, who produced Florida Driver's License as identification or is personally known to me, and who executed the foregoing instrument and she acknowledged before me that she executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this Aday of November, 2014.

NOTARY PUBLIC

Notary Public Printed Name

My Commission Expires:

DIANE LEE
NOTARY PUBLIC
STATE OF FLORIDA
Comm#FF078972
Expires 12/25/2017

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First - that FLAPJACK JOHNNY'S GROVELAND, LLC, desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Organization, at the City of Groveland, County of Lake, State of Florida, has named Kevin M. Stone, of Stone & Gerken, P.A., 4850 N. Highway 19A, Mount Dora, Florida 32757, as its agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated Company, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said offices.

Kevin M. Stone, Registered Agent

Sworn to and subscribed before me this 250 day of November, 2014 by Kevin M. Stone.

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NOTARY PUBLIC

My Commission Expires:

DIANE LEE
NOTARY PUBLIC
STATE OF FLORIDA
Comm# FF078092
Expires 12/26/2017

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SECRETARY OF STATE
SECRETARY OF STATE

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