

L19000180366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

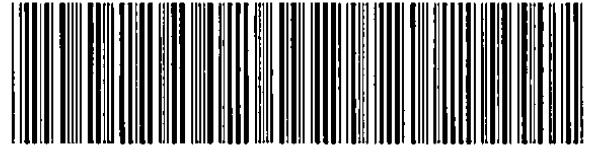
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CAPITAL CONNECTION, INC.

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

PETER'S PIZZERIA LLC

Signature _____

Requested by: Seth

Name _____ Date _____ Time _____

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- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

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ARTICLE I

Name

The name of the Limited Liability Company is:

PETER'S PIZZERIA LLC

ARTICLE II

Address

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

Principal Office Address:

524 First Street
Port St. Joe, FL 32456

Mailing Address:

524 First Street
Port St. Joe, FL 32456

ARTICLE III

Registered Agent, Registered Office & Registered Agent's Signature

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

Ira R. Shapiro
16375 NE 18th Avenue, Suite 225
North Miami Beach, FL 33162

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 605, F.S.



Ira R. Shapiro, Registered Agent

ARTICLE IV
Entity Purpose

The Limited Liability Company's purpose is to invest in qualified opportunity zoned property. Substantially all of its owned or leased tangible property is qualified opportunity zoned business property, and substantially all of its intangible property is used in the active conduct of qualified opportunity zoned business.

ARTICLE V
Management

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

ARTICLE VI
Persons Authorized to Manage and Control

The name and address of each person authorized to manage and control the Limited Liability Company are as follows:

Title:

"AMBR" - Authorized Member
"MGR" - Manager

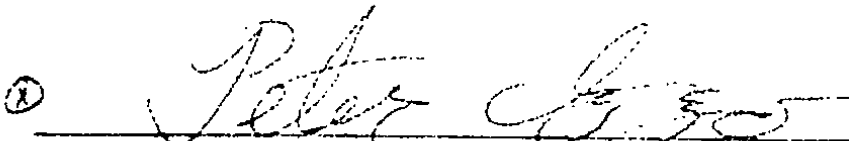
Name and Address:

MGR

Peter A. Izzo
524 First Street
Port St. Joe, FL 32456

MGR

Robert W. Pokora
524 First Street
Port St. Joe, FL 32456



Peter A. Izzo, MGR

(In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.153, F.S.)