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FILED

95 JUN 30 AM 9:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

June 28, 1995

Secretary of State
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

RE: WINGS N' RIBS OF CAPE CORAL, L.C.

Dear Sir:

Please find enclosed Articles of Organization, a Registered Agent Certificate and Affidavit as required by Florida Statutes for the above referenced Limited Liability Company. Please also find enclosed my client's check for \$285.00 for the filing fee and the Registered Agents Certificate.

Since the name that this company is being organized under is very similar to the name of a corporation located in Lee County, I have included a letter from that corporation indicating that they have no objection to the use of the above referenced name by the Limited Liability Company. The companies are associated by common ownership.

If there are any questions or any further information needed, please advise.

Sincerely,

JACK P. PANKOW
ATTORNEY AT LAW

JPP/ams

Enclosures

At\wings.sos

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****285.00 ****285.00

PPH
7-26

ARTICLES OF ORGANIZATION
FOR
WINGS 'N RIBS OF CAPE CORAL, L.C.

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned desiring to form a Limited Liability Company, under and pursuant to Florida Statutes Chapter 608, do hereby adopt the following Articles of Organization for such Company.

ARTICLE I.

The name of the Limited Liability Company shall be WINGS 'N RIBS of CAPE CORAL, L.C.

ARTICLE II.

This Limited Liability Company is to exist perpetually.

ARTICLE III.

The mailing address and street address of the principal office of this Limited Liability Company shall be 3758 Cleveland Avenue, Fort Myers, Florida 33901 and the initial registered agent of said Limited Liability Company is DOUGLAS F. RAKER.

ARTICLE IV.

This Limited Liability Company may engage or transact in any and all lawful activities or business, permitted under the laws of the United States, the State of Florida, or any other State, Country or Territory or Nation.

ARTICLE V.

Additional members may be admitted upon the approval of the majority of the members of the Company, upon the written application of such new member, in the manner set forth in the By-Laws of this Company.

ARTICLE VI.

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company, the remaining members of this Limited Liability Company may continue the business.

ARTICLE VII.

This Limited Liability Company shall be managed by:

DOUGLAS F. RAKER	-----	4923 S.W. 8th Place
		Cape Coral, FL 33914

ARTICLE VIII.

The power to adopt, alter, amend or repeal the regulations of this company shall be vested in the members.

ARTICLE IX.

The name and street address of the member executing these Articles of Organization is:

DOUGLAS F. RAKER	-----	4923 S.W. 8th Place
		Cape Coral, FL 33914


IN WITNESS WHEREOF DOUGLAS F. RAKER has hereunto set
his name and seal on this 27 day of JUNE, 1995.


DOUGLAS F. RAKER

STATE OF FLORIDA)
COUNTY OF LEE)

Sworn to and subscribed before me this 27 day of
JUNE, 1995.

My Commission Expires:
10-17-95

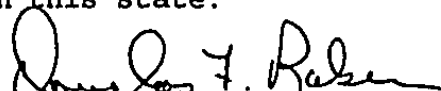

Notary Public
JACK PANKOW
Printed Name of Notary

CC: _____

REGISTERED AGENT CERTIFICATE

Pursuant to Chapter 48.901, Florida Statutes, the
following is submitted in compliance with said Act.

That, WINGS 'N RIBS OF CAPE CORAL, L.C., is desiring to
organize under the laws of the State of Florida, with its principal
office as indicated in the Articles of Organization at 3758
Cleveland Avenue, Fort Myers, Florida 33901, and DOUGLAS F. RAKER
as its agent to accept service within this state.


DOUGLAS F. RAKER

ACKNOWLEDGMENT

Having been named to accept service of process of the above-stated Limited Liability 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 office.


DOUGLAS F. RAKER

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FILED
95 JUN 30 AM 9:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

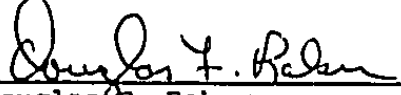
AFFIDAVIT

STATE OF FLORIDA)
COUNTY OF LEE)

After being duly deposed and sworn, I, DOUGLAS F. RAKER,
state as follows:

1. WINGS 'N RIBS OF CAPE CORAL, L.C., has at least two
members who are Douglas F. Raker and James L. Raker.


2. The members have contributed cash in the amount of
\$150,000.00 to the Limited Liability Company, at the time of this
Affidavit and anticipate contributing \$ -0- in the future.


Douglas F. Raker

Sworn to and subscribed before me this 27th day of
June, 1995.

My Commission Expires:

10-17-98


NOTARY PUBLIC
Jack Rankow
Printed Name of Notary

Commission Number

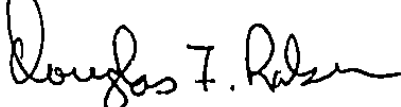
June 27, 1995

SECRETARY OF STATE
STATE OF FLORIDA
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32301

RE: WINGS 'N RIBS OF CAPE CORAL, L.C.

Please be advised that the Florida corporation known as Wings 'N Ribs, Inc. has no objection to the use of the above referenced name by the applicant for that name. The owners of both are interrelated.

Sincerely,

A handwritten signature in cursive script, appearing to read "Douglas F. Raker".

Douglas F. Raker
President
Wings 'N Ribs, Inc.

FILE NOW: Fee after May 1, will be \$263.75

APPROVED
AND
FILED

1996 FEB -8 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILING FEE
\$ 238.75
Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT #L95000000517

WINGS 'N RIBS OF CAPE CORAL, L.C.
3758 CLEVELAND AVENUE
FORT MYERS FL 33901

1a. Principal Place of Business Address
3758 CLEVELAND AVENUE
FORT MYERS FL 33901

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		06/30/1995	FL
City & State <i>Same</i>		City & State <i>Same</i>		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Zip		65-0619732	
Country		Country		5. Date of Last Report	6. Certificate of Status Desired
					<input type="checkbox"/> <input type="checkbox"/>

7. Name and Address of Current Registered Agent

RAKER, DOUGLAS F
3758 CLEVELAND AVENUE
FORT MYERS FL 33901

8. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

Zip Code

FL

9. Pursuant to the provisions of Sections 608.418 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature required when reappointing)

DATE

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	RAKER, DOUGLAS F	4923 S.W. 8TH PLACE	CAPE CORAL FL
M	RAKER, JAMES L	3758 CLEVELAND AVENUE	FORT MYERS FL
			700001719587 -02/20/96--01114--005 ****238.75 ****238.75

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *Douglas F. Raker* Douglas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER OR MEMBER OR MANAGER

Date

Daytime Phone #