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Office Use Only



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SECRETARY OF STATE

NEAD PROPERTY OF STREET

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: MALF A SANDWICH LLC			
(Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
JAMES GREEN			
(Name of Person)			
Prow ESTATE			
(Firm/Company)			
12415 SW 136TH AVENUE SUITE#2			
MIAMI FL 33186 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
(ALEC CREEN) 7100 501 1800			
TAMES GREEN at (786) 581 1800 (Name of Person) (Area Code & Daytime Telephone Number)			
MAILING ADDRESS: STREET ADDRESS:			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: []\$125.00 Filing Fee \$130.00 Filing Fee & \$ \$155.00 Filing Fee & \$ \$			
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January 29, 2008

JAMES GREEN 12415 SW 136TH AVENUE SUITE #2 MIAMI, FL 33186

SUBJECT: HALF A SANDWICH LLC Ref. Number: W08000004818

We have received your document for HALF A SANDWICH LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

You must complete the Certificate of Designation of Registered Agent/Registered Office form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 408A00005962

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 26 - 147 17 6 3 (FEI number, if applicable) PELPETUAL

(Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 12415 SLO 136TH MONUE SUITE#2 MIAMI FL 33186
(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here | 9. The name and usual business addresses of the managing members or managers are as follows: JONDOHAN SANN & MARVIN SAMEL C/ODREW GIATE 12415 SW 136 TH AVENUE, SUITE #2 MIAMT , FL 33186

Nature of business or purposes to be conducted or promoted in Florida: To PRODUCTS

Signature of a member or an authorized representative of a member.

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in

the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language; a

translation of the certificate under oath of the translator must be submitted.)

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

NARVIN SAMEL

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of th	c Limited Liability Company is:	
HALF A SANDWICE	HLLC	
2. The name and	the Plorida street address of the registered agent and office are:	
	C T Corporation System	SECRE SECRE
_	(Name)	P-3 PH. AHASSEE F
_	1200 South Pine Island Road	SEX P
_	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation, Florida 33324	TATE ORIDA
_	City/State/Zip	D

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, Florida Statutes.

By: JAMES M. NEWSOME

(Signature) Special Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HALF A SANDWICH LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2007.

071258039 You may verify this certificate online at corp.delaware.gov/authver.shtml Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6189403

DATE: 11-27-07