

RF

RESOURCE FUNDING
875 SW Whisper Ridge Trail
Palm City, FL 34990
Phone: 561.283.6992 Fax: 561.283.7720

L02000000331

December 14, 2001

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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-12/17/01--01029--012
****125.00 ****125.00

Enclosing my application for the formation of a Florida Limited Liability Company.
My check #1098 is enclosed in the amount of \$125.00 to cover the filing fee
(\$100) and the designated registered agent fee (\$25.00).

THE EFFECTIVE DATE OF THE LLC IS: JANUARY 1, 2002

I can be reached by phone at: 561.283.6992 or by fax: 561.283.7720

Sincerely,



Victor Ardito

FILED
2001 DEC 31 PM 1:43
DIV. OF CORPORATIONS
TALLAHASSEE, FLORIDA

4



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

December 19, 2001

VICTOR ARDITO
RESOURCE FUNDING
875 SW WHISPER RIDGE TRAIL
PALM CITY, FL 34990

SUBJECT: RESOURCE FUNDING, LLC
Ref. Number: W01000029028

We have received your document for RESOURCE FUNDING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Shawn Logan
Document Specialist

Letter Number: 701A00066487

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DIV. OF CORP. OPERATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: RESOURCE FUNDING, LLC

ARTICLE II - Address:

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

875 SW WHISPER RIDGE TRAIL, PALM CITY, FL 34990

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

VICTOR ARDITO

Name

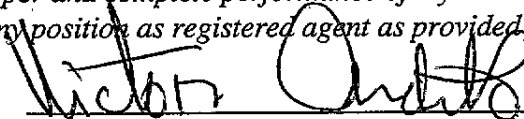
875 SW WHISPER RIDGE TRAIL

Florida street address (P.O. Box **NOT** acceptable)

PALM CITY FL 34990

City, State, and Zip

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, F.S..



Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

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.)

VICTOR ARDITO

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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DIVISION OF CORPORATIONS
& ALLIANCE, FLORIDA