


## 02-14-2003 90066 019 \*\*\*\*\*55.00

DOCUMENT # L02000002333

1. Entity Name

RAJOMA, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12241 NW 26 STREET

Suite, Apt. #, etc.

City & State

PLANTATION FL.

Zip

33323

Country

BROWARD.

3. Mailing Address

12241 NW 26 STREET

Suite, Apt. #, etc.

City & State

PLANTATION FL.

Zip

33323

Country

BROWARD.

DO NOT WRITE IN THIS SPACE

4. FEI Number

38-3641599

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

SEIDNER, RICARDO L

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

12241 NW 26 STREET

City

PLANTATION


FL

Zip Code

33323

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE



RICARDO SEIDNER

02/12/03.

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State


DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

<div>TITLE</div> <div>NAME</div> <div>STREET ADDRESS</div> <div>CITY-ST-ZIP</div>	<div>MGRM</div> <div>RICARDO L SEIDNER</div> <div>12241 NW 26 STREET</div> <div>PLANTATION, FL. 33323</div>	<div>TITLE</div> <div>NAME</div> <div>STREET ADDRESS</div> <div>CITY-ST-ZIP</div>	
<div>TITLE</div> <div>NAME</div> <div>STREET ADDRESS</div> <div>CITY-ST-ZIP</div>	<div>MGRM</div> <div>ADRIANA ISAACS</div> <div>12241 NW 26 STREET</div> <div>PLANTATION, FL 33323</div>	<div>TITLE</div> <div>NAME</div> <div>STREET ADDRESS</div> <div>CITY-ST-ZIP</div>	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE



RICARDO SEIDNER

02/12/03.

(954) 693-3545

DATE

Daytime Phone #