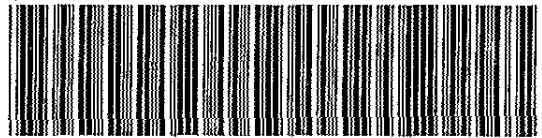


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MICHELLE SULLER
100 Ocean Lane Drive #408
Key Biscayne
FL 33133



100023941941

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

10/21/03--01007--002 **125.00

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 8, 2003

MICHELLE SOLER
100 OCEAN LANE DRIVE #408
KEY BISCAYNE, FL 33149

SUBJECT: CD FUNDING CORP. LLC
Ref. Number: W03000031146

We have received your document for CD FUNDING CORP. 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):

You failed to make the correction(s) requested in our previous letter.

The name of the entity cannot include "CORP.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 503A00058241

04 JAN -2 2004
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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 25, 2003

MICHELLE SOLER
100 OCEAN LANE DRIVE #408
KEY BISCAYNE, FL 33149

SUBJECT: BANK FUNDING CORP. LLC
Ref. Number: W03000031146

We have received your document for BANK FUNDING CORP. 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):

The name of the entity cannot include "CORP.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Written approval and clearance of the terms BANK, BANKER, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION or words of similar import, must be obtained from the Office of Financial Institutions, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Name Approval Request" form to be filled out and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and approval letter to the Division of Corporations for filing.

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) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 503A00058241

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: - CD Funding LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle Soter
(Name of Person)

CD Funding LLC
(Firm/Company)

100 Ocean Lane Drive 408
(Address)

King Biscayne Fl 33149
(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Soter at (305) 365 7913
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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12/15/03

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

CD Funding LLC

ARTICLE II - Address:

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

Principal Office Address:

2911 GRAND Ave
Suite 4-A
COCONUT GROVE FL 33133

Mailing Address:

2911 GRAND Ave
Suite 4-A
COCONUT GROVE FL 33133

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

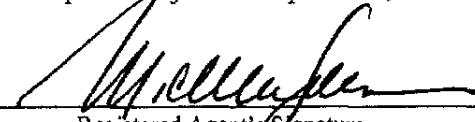
The name and the Florida street address of the registered agent are:

Michelle Soler
Name

100 Ocean Lane Drive 408
Florida street address (P.O. Box NOT acceptable)

Key Biscayne FLORIDA 33149
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, Florida Statutes..


Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Name and Address:

Michelle Soler
180 OCEAN LAKE DRIVE 408
KEY BISCAYNE FL 33149

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

Michelle Soler
Typed or printed name of signer

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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04 JAN -2 10 10 09