

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: I20010000247

Phone

: (800) 494-3124

Fax Number

: (305) 675-2811

LIMITED LIABILITY COMPANY

Capital One Funding LLC

Certificate of Status	0
Certified Copy	0
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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

CAPITAL ONE FUNDING LLC

ARTICLE II ADDRESS

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

576407 ARBOR CLUB WAY BOCA RATON, FL 33433

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

GREG MOYE 576407 ARBOR CLUB WAY BOCA RATON, FLORIDA 33433

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent, as provided for in Chapter 608, F.S..

GREG MOYE / Registered Agent's Signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

ARTICLE VI

Managing Member: GREG MOYE ; 576407 ARBOR CLUB WAY BOCA RATON, FLORIDA 33433

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.)

GREG MOYE
Typed or printed name of signee

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