Florida Department of State **Division** of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H050001715143)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations Fax Number · (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

OIVISION OF CORPORATION 05 JUL 15 PH 3: RECEIVEI

ŝ

LIMITED LIABILITY COMPANY

raj 118, llc

Certificate of Status	0		
Certified Copy	1		
Page Count	03	J. BRYNN	
Estimated Charge	\$155.00	- ANN	JUL 1

8 2005

FILE 1 9:55



DIJISIU

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

RAJ 118, LLC

ARTICLE I



The name of the Limited Liability Company shall: RAJ 118, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 1637 NW 27TH AVENUE # 200, MIAMI, FL 33125.

ARTICLE IV

The name and the Florida street address of the registered agent: JORGE MORERA, 1637 NW 27TH AVENUE #200, MIAMI, FL 33125.

ARTICLE V

The name of managing member(s) of this company shall be:

ALBERT ARISSO

MANAGING MEMBER RALPH VELOCCI

MANAGING MEMBER MANAGING MEMBER JORGE MORERA



20.9 JATOT

00171514

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

> RAJ 118. LLC (Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

stered Agent

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.)

JORGE MORERA Typed or printed name of signee

001715