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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RAJCORP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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T. HAMPTON

FEB 22 2008

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RAJCORP, LLC

ARTICLE II - Address:

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

Principal Office Address:

614 EAST HIGHWAY 50
SUITE No: 275
CLERMONT, FL 34711

Mailing Address:

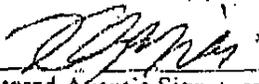
614 EAST HIGHWAY 50
SUITE No: 275
CLERMONT, FL 34711

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

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

KHALID S. GAJRAJ
15836 WAVERLY MANOR
DAVIE FL 33331

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 (REQUIRED)

(CONTINUED)

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

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

Title: Name and Address:

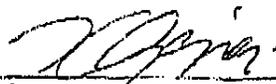
SAFRAZ A. GAJRAJ-MANAGER
15836 WAVERLY MANOR
DAVIE, FL 33331

KHALID S. GAJRAJ-MANAGING MANAGER
15836 WAVERLY MANOR
DAVIE, FL 33331

TAARIK GAJRAJ-MANAGER
15836 WAVERLY MANOR
DAVIE, FL 33331

ARTICLE V: Effective date, if other than the date of filing: 2-21-8
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

KHALID GAJRAJ

Typed or printed name of signee

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