

L08000095252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

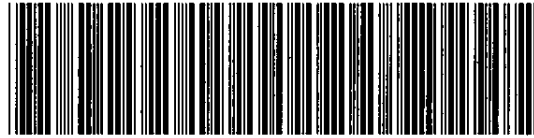
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/24/08--01021--002 **160.00

FILED

08 OCT -7 AM 11:15

CLERK OF COURT
TALLAHASSEE, FLORIDA

B. KOHR

OCT - 8 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2008

TERESA DOWELL
EZQUALS, INC.
2000 TOWN CENTER, SUITE 850
SOUTHFIELD, MI 48075

SUBJECT: RFG MORTGAGES, LLC
Ref. Number: W08000044474

FILED
08 OCT - 7 AM 11:15
TALLAHASSEE, FLORIDA

We have received your document for RFG MORTGAGES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$160.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 908A00051513

EZQuals, Inc.

September 30, 2008

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
08 OCT -7 AM 11:15
DIV OF STATE
TALLAHASSEE, FLORIDA

RE: R & J SOLDI LLC

To Whom It May Concern:

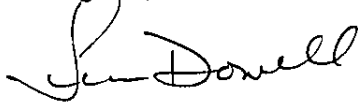
Attached hereto is the Articles of Organization for Limited Liability Company for R & J SOLDI LLC for your review and filing along with a check in the amount of \$160.00 for filing fee.

Upon filing, please email or fax the evidence back to my attention and then return the original via regular mail.

If you have any questions please do not hesitate to contact me at (248) 663-1277 or tdowell@ezquals.com.

I thank you in advance for your attention to this matter.

Regards,



Teresa Dowell
248-663-1277
248-663-1271 fax

Enclosures

FILED
08 OCT -7 AM 11:15
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

REJ SOLDI LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

10041 E. Adamo Drive

Tampa, FL 33619

Mailing Address:

EzQuals, Inc.

2000 Town Center, Suite 850

Southfield, MI 48075

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

InCorp Services, Inc.

Name

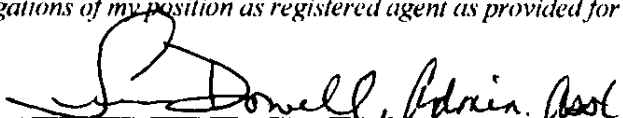
17888 67th Court North

Florida street address (P.O. Box **NOT** acceptable)

Loxahatchee FL 33470

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, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Name and Address:

"MGRM"

Jose A. Roca

10041 E. Adamo Drive

Tampa, FL 33619

"MGRM"

Jenny Roca

10041 E. Adamo Drive

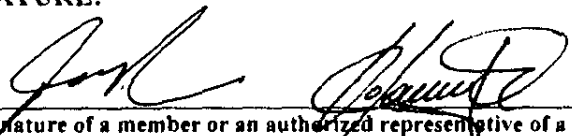
Tampa, FL 33619

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(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.)

Jose A. Roca - JENNY ROCA

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)