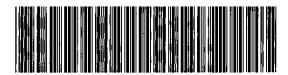
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(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
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PICK-UP	WAIT	MAIL
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(=	,	,
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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Effective Date 68/15/10

SECRETARY OF STATE OIVISION OF CORPORATIONS

10 JUL 16 PM L: 11

T. HAMPTON

JUL 1 0 2019

EXAMINER

116-32150

COVER LETTER

	stration Sec sion of Corp			
SUBJECT: 1	RAJ RAC			
		Name of Limite	ed Liability Company	
The enclosed	Articles of (Organization and fee(s) are	submitted for filing.	
Please return a	all correspor	ndence concerning this matt	er to the following:	
RON	ALD D. AL	LEN, JR.		
			Name of Person	
RAJ F	RACING,L	LC		
			Firm/Company	
12501	1 GLENNA	AVE.		
			Address	
TAME	PA, FL 336			
		Cit	y/State and Zip Code	
rajroc	ks2009@I		or future annual report notification)	
For further inf	formation co	ncerning this matter, please	-	
Ronald J. A	Ronald J. Allen, Jr. at (517)917-1664			
	Name of	Person	Area Code & Daytime Telep	hone Number
Enclosed is a	check for	the following amount:		
☑\$125.00 Fili	ing Fee 【	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cl Tallahassee, FL 32301	ircle



RECEIVED

09 JUL 16 PM 4:00

FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 7, 2010

RONALD D ALLEN, JR 12501 GLENNA AVE TAMPA, FL 33635

SUBJECT: RAJ RACING, LLC Ref. Number: W10000032150

We have received your document for RAJ RACING, 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):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on July 6, 2010. Please amend your document 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) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 610A00016540

Effective Date 08/15/10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	, .	
The name of the Lim	•	mpany is:
RAJ RACING, LL	С	
(Must	end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Add	ress:	
The mailing address	and street address	s of the principal office of the Limited Liability Company is
Principal Office Address:		Mailing Address:
12501 GLENNA AVE		12501 GLENNA AVE
TAMPA, FL 33635		TAMPA, FL 33635
		ss of the registered agent are:
_	Name	
1	2501 GLENNA	AVE
_	Florid	a street address (P.O. Box NOT acceptable)
<u></u>	AMPA	FL 33635
		City, State, and Zip
liability company registered agent and statutes relating to	at the place desig agree to act in thi. the proper and coi	nt and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as s capacity. I further agree to comply with the provisions of a mplete performance of my duties, and I am familiar with and n as registered agent as provided for in Chapter 608, F.S
	_	

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

OIVISION OF CORPORATIONS

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managi	ng Member
MGRM	RONALD D. ALLEN JR 12501 GLENNA AVE
	TAMPA FL,33635
(Use attachment if no	ecessary)
ARTICLE V: Effective date (If an effective date is listed, to or 90 days after the date of	the date must be specific and cannot be more than five business days prior of filing.)
REQUIRED SIGNA	ATURE:

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.)

RONALD D. ALLEN JR

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)

10 JUL 16 PM 4: 14