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SECRETANT OF STATE
TALL AHASSEE, FLORIDA

J. BRYAN

AUG 1 0 2010

EXAMINER

COVER LETTER

TO:	Registi	ation Secon	ction porations			
SUBJ	ECT:	RJA	FUNDING, L.L.C.			
	`		Name of Limited I	Liability Company		
The e	nclosed A	rticles o	f Organization and fee(s) are s	ubmitted for filing.		
Please	e return al	l corresp	ondence concerning this matte	er to the following:		
• . •:	ROB	ERT C.	STONE			·
_			Name of	Person		TASE 5
	RJA	A FUNI	DING, L.L.C.			馬四
_			Firm/Co	ompany		SSS 6
	555 SC	OUTH	FEDERAL HIGHWAY,	SUITE 450		PH 3: 22 PH 3: 22 PH 3: 22
-		•	Add	ress		4: 2: ORIES
	ВОС	A RAT	ON, FLORIDA 33432			DA C
-			City/State ar	nd Zip Code		-
	Rsto	ne4173	@aol.com			
-			E-mail address: (to be used for f	uture annual report notification	on)	_
For fur	ther inform	nation cor	ncerning this matter, please call:			
ROB	ERT C.	STON		561	338-4844	
	1	Name of I	Person	Area Code & Daytime Telep	hone Number	
Enclo	sed is a c	check fo	or the following amount:			
_\$125	5.00 Filin	g Fee	X\$130.00 Filing Fee & Certificate of Status	_\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	_\$160.00 Filing Certificate of \$ & Certified Co (additional copy is en	Status Opy

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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARPECT EX Nome					
ARTICLE I – Name The name of the Limit		is:			
RJA FUNDING,L.L	л. С .				
	Must end with the word "Limit	ted Liability Company, "L.L.C" or LLC.")			
. ,	•	to Blashing Company, B.B.C or BEC.			
ARTICLE II – Addr The mailing address and		ncipal office of the Limited Liability C	Company is:		
Principal Office Add	ress:	Mailing Address:			
Robert C. Stone		Robert C. Stone			
555 South Federal His	hway, Ste. 450	555 South Federal Highway, S	Ste. 450		
Boca Raton, FL 33432		Boca Raton, FL 33432			
(The Limited Liability Compa entity with an active Florida re	ny cannot serve as its own Reg egistration.)	tered Office, & Registered Agent istered Agent. You must designate an individual of the registered agent are:			
erio.	Rob	pert C. Stone	SEOR TALLI	10 A	
	Name		AUG		
555 South F		eral Highway, Suite 450		-9	ר
	Florida street address (P.O. Box NOT acceptable)		70		
i a h	Boca R	aton, FL 33432	ORIUA	3: 22	
Program	City, State, and Zip		-		
liability company at the Registered agent and ag statutes relating to the	ne place designated in thi ree to act in this capacity proper and complete pet	ccept service of process for the above sis certificate, I hereby accept the appov. I further agree to comply with the pformange of my duties, and I am familitered agent as provided for in Chapter	intment as provisions of all liar with and		

(CONTINUED)
Page 1 of 2

ARTICLE IV - Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Robert C. Stone 431 Thatch Palm Drive Boca Raton, FL 33432 Joseph H. Muraskin 300 Three Island Blvd. Hallendale Beach, FL 33009 "MGR" A. Poonai 5051 45th Road South Lake Worth, FL 33463 (Use attachment if necessary) (OPTION **ARTICLE V:** Effective date, if other than the date of filing (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.) 1,1 REQUIRED SIGNATA

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.)

ROBERT C. STONE

Typed or printed name of signee

Filing Fees:

Tellow.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)