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(Requestor's Name)	
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(Business Entity Name)	
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Certified Copies	Certificates of S	Status

Special Instructions to Filing Officer:

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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: RAS Global LLC	
	ed Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Dinkerbhai Patel	Name of Person
	Name of Ferson
	Firm/Company
2418 Golfview Drive	
	Address
Fleming Island, FL 32003	
c։ rasglob@hotmailcom	ty/State and Zip Code
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, pleas	e call:
Dinkerbhai patel	at (904) 505-4824
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \tag{\$130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 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 Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
RAS GI	obal LLC	
	(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
	I - Address: address and street address of the principal office of the Limited Liability	

Principal Office Address:	Mailing Address:
2418 Golfview Drive	2418 Golfview Drive
Fleming Island, FL 32003	Fleming Island, FL 32003

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:

ARTICLE I - Name:

Dinkerbhai Patel	
N	ame
2418 Golfview	Drive
Florida stree	t address (P.O. Box NOT acceptable)
Fleming Island	_{FL} 32003
Cit	y, 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)

Page 1 of 2

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SECRETARY OF STATE

Company is:

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 "MGRM" = Managing Member	Name and Address:
MGRM	Dinkerbhai Patel
	2418 Golfview Drive Fleming Island, FL 32003
MGR	Niruben Patel
	2418 Golfview drive
	Fleming Island, FL 32003
(Use attachment if necessary)	
	be specific and cannot be more than five business days prior

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Dinkerbhai Patel

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)