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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Sasinoso Emily Hamo)
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THE FEB ID PH 3: 47

N 02/25/16

COVER LETTER

	legistration Section Division of Corporations		
SUBJECT	Universal Court Reporting Legal	Funding, LLC	
SUBJECT	Name of	Limited Liabili	ty Company
The enclos	sed Articles of Organization and fee(s	s) are submitted	for filing.
Please retu	ırn all correspondence concerning thi	s matter to the f	ollowing:
	Robert C. Stone		
		Name of	Person
	RObert C. Stone, P.A.		
		Firm/Co	mpany •
	33 SE 5th Street, Ste. 100		
		Addr	ess
	Boca Raton, FL 33432		
	rstone4173@aol.com	City/State an	d Zip Code
		used for future a	nnual report notification)
For further	information concerning this matter, p	lease call:	
	Robert C. Stone	561	338-4844
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00 F	_	, L—J _{Certifi}	copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Universal Court Reporting Legal Funding, LLC	
(Must end with the words "Limited Liabili	ty 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:
	Mailing Address:
Principal Office Address:	Wanting Address.
Principal Office Address: 33 SE 5th Street, Ste. 100	33 SE 5th Street, Ste. 100
	 -

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

Robert C. Stone, P.A.

Name

33 SE 5th Street, Ste. 100

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

Boca Raton FL 33432

City State 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 pry position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

TABLE OF PH 3-47

<u>Citle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager AMBR	Robert C. Stone
WIDK	33 SE 5th Street, Ste. 100
	Boca Raton, FL 33432
	* ***
AMBR	James King 888 East Las Olas Boulevard, Ste. 508
	Fort Lauderdale, FL 33301
	Port Laudetuale, P.E. 35301
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