

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO.

Rapid Mortgage Investments, LLC

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Estimated Charge	\$160.00

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## COVER LETTER

TO:		ion Section of Corporations		
SUBJEC		d mortgage investm	ients, llc	
	···	Name of	Limited Liabili	ty Company
The enc	losed Artic	les of Organization and fee(:	s) are submitted	for filing.
Pleasen	eturn all co	rrespondence concerning thi	s maiter to the f	ollowing:
	KRIST	EN M. LYNCH, ESQUIRE		
			Name of	Person
	LUBEI	LL ROSEN		
			Firm/Co	ubany.
	MUSE	UM PLAZA / 200 S. ANDR	LEWS AVENUE	E, SUITE 900
			Addre	55
	FORT	LAUDERDALE, FI. 33301		
	kml@lul	pellrosen.com	City/State and	I ZIp Codc
	·	H-mail address: (to be u	sed for fuure a	nual report notification)
מלודוטו זכיי	r informatio	on concerning this matter, pl	case call:	
	KRISTE	EN M. LYNCH	954	880-9500
	<u></u>	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check	for the following amount:		
7\$125,00 -	Filing Fue	\$130.00 Filing Fee & Certificate of Status	LCertifie	Siting Fee & Siting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	No Di P.O	ailing Address  we Filing Section  vision of Corporations  O. Box 6327  allahassee, FL 32314	2 0 2	itrest Address lew Filing Section Division of Corporations Hitton Building 661 Executive Center Circle fallahassee, F1, 32301

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:				
	E INVESTMENTS, LL		y, "L.L.C.," or "LLC.")		
AR'I (CLE II - Address: The mailing address and street ad			·		
Principa	l Office Address:		Malling Address:		
21340 NE 23rd Court Miami, FL 33180			40 NE 23rd Court mi, FL 33180		
ARTICLE III - Registered Ages (The Limited Liability Compan) of another business entity with an ac-	cannot serve as its own	Registered Agent.		alor A	
The name and the Florida street a	ddress of the registered	agent are:		To any	eprod Starti
	KRISTEN M. LYNC	H, ESQ. c/o LUB	ELL ROSEN	ا جرين 1	ANTICAMENT INTERPRETATION
		Name			
	Museum Plaza / 200	S. Andrews Avenu	ie, Suite 900		e de la company
	Florida street address	(P.O. Box <u>NOT</u> a	ecceptable)	101 112 113 113 113 113 113 113 113 113 11	ETCHICAGO TO
	Fort Lauderdale	FL	33301	L:50	C. Carried F
	City	Sime	Zip	<b>&gt;</b> -	

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 605. F.S..

(CONTINUED)

Signature (REQUIRED)

Page 1 of 2

"MGR" = Manager MGR	
MGR	A 1 BA A
	Arlene Blander
	21340 NE 23rd Court
	Miami, FL 33180
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	may any
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(Use attachment if necessary)	
of filing.) If the date inserted in this block does not me iment's effective date on the Department of	et the applicable statutory filing requirements, this date will not be liste
•	nute's records.
LE VI: Other provisions, if any	
LE VI: Other provisions, if any. C is organized as a manager-managed LLC	
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LE VI: Other provisions, if any. C is organized as a manager-managed Li.C	
E VI: Other provisions, if uny. C is organized as a manager-managed LLC  REQUIRED SIGNATURE:	for purposes of F.S. 0605.0407
E VI: Other provisions, if uny. C is organized as a manager-managed LLC  REQUIRED SIGNATURE:	Blower Manager
E VI: Other provisions, if uny. C is organized as a manager-managed LLC  REQUIRED SIGNATURE: Signature of a mem	Blonder Manager ber or an authorized representative of member.
E VI: Other provisions, if uny. C is organized as a manager-managed LLC  REOURED SIGNATURE: Signature of a mem This document is executed it am aware that any false in	ber or an authorized representative of a member. In accordance with section 605.020 (1) (b), Florida Statutes. Information submitted in a document to the Dengament of State
E VI: Other provisions, if uny. C is organized as a manager-managed LLC  REOUTEED SIGNATURE: Signature of a mem This document is executed it am aware that any false in	Blonder Manager ber or an authorized representative of member.
REOUTED SIGNATURE:  Signature of a mem This document is executed I am aware that any false in constitutes a third degree for	ber or an authorized representative of a member.  In accordance with section 605.0203 (1) (b), Florida Statutes.  Information submitted in a document to the Department of State clony as provided for in s.817.155, F.S.
REOURED SIGNATURE:  Signature of a mem This document is executed i am aware that any false in constitutes a third degree for Arlene Blander, Ma	ber or an authorized representative of a member.  In accordance with section 605.0203 (1) (b), Florida Statutes.  Information submitted in a document to the Department of State clony as provided for in s.817.155, F.S.

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