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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: R & R Projects, LLC	
(Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limite liability company to transact business in Florida	
Please return all correspondence concerning this matter to the following:	
David W. Southwell	
(Name of Person)	
Creative Asset Protection Strategies, Inc.	
(Firm/Company)	
16191 NW 57th Avenue	
(Address)	
Miami, FL 33014	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
David W. Southwell at (305) 621-0220	
(Name of Person) (Area Code & Daytime Telephone Number)	
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\Bigsim \frac{1}{2} \frac{1}{2	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

_{1.} R & R Projects, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Li-Company," "L.L.C.," "LLC.")	
_{2.} Arkansas _{3.} 26-1221471	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. October 2, 2007 5. 20	
(Date of Organization) (Duration: Year limited liability company will cease exist or "perpetual")	to
6. October 18, 2007	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	DIV
7. 2412 NW 97th Way 3	SECI SECI
Pembroke Pines, FL 33024	
(Street Address of Principal Office)	マラー
8. If limited liability company is a manager-managed company, check here \(\overline{\mathcal{Z}} \)	्य
9. The name and usual business addresses of the managing members or managers are as follows: 5	<u>.</u>
Richard A. Merrill	`.'
2412 NW 97th Way	
Pembroke Pines, FL 33024	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, translation of the certificate under oath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate	
Richt MM	<u>_</u> ·
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes	
an affirmation under the penalties of perjury that the facts stated herein are true.)	

Typed or printed name of signee

Richard A. Merrill

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name o	f the Limited Liability Company is:
R & R Proje	ects, LLC
If name unavai	lable, the alternate name to be used in the state of Florida is:
2. The name a	nd the Florida street address of the registered agent and office are:
	Richard A. Merrill
	(Name)
	2412 NW 97th Way
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Pembroke Pines, FL 33024 FL
	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 my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)