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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
	A. LUNT
,	MAY - 6 2008
E	EXAMINER

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SECRETARY OF STATE
ALLAHASSEF FINANCE

FILED

COVER LETTER

	ration Section on of Corporations				
SUBJECT:	AA	EQUITY L	ENDING, LLC ted Liability Company)	<u>, </u>	
		(Name of Limi	ted Liability Company)		
Florida," Cert		and check are su	bility Company for Authorize bmitted to register the above		
Please return	all correspondence co	oncerning this m	atter to the following:		
		AWNELLE (CAPLON		
•		(Nai	ne of Person)	ALL SE	785
	LAWNER	E A. CAO	PLAN, PA m/Company)	CRETA AHAS	FILED
	r	(Fir	n/Company)	<u>~</u>	
	<u>1900 C</u>	DAPARAGE	(Address)	Y00\$5 .	
		((Address)	OA O	ĭ
	BC	CA RATO	M FC 3343 (Ite and Zip Code)		
		(City/Sta	ite and Zip Code)		
For further in	formation concerning	this matter, plea	ase call:		
<u> </u>	L-CAPLAN (Name of Pe	✓	_ at (<u>\$6</u>) <u>\$8</u> (Area Code & Daytime	6009	_
	(Name of Pe	rson)	(Area Code & Daytime	Telephone Numb	oer)
	ING ADDRESS:		STREET ADDRESS:		
	on of Corporations		Division of Corporations		
	assee, FL 32314		Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle	
Enclosed is a ☐\$125	check for the followin 0.00 Filing Fee	ng amount: 0.00 Filing Fee & Certificate of	\$155.00 Filing Fee & Status Certified Copy	-	Certificate Certified Copy

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:

AA ERVITILEMING. LLC
1. AA EQUITY LENDING, 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 the writter consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. APML 30, 2008 (Date of Organization) 5. 2038 (Duration: Year limited liability company will cease to exist or "perpetual")
6. HAS NOT VET TRANSACTED BUSIMESS IN FL. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
78401 LAME NOMHM., SUMEZII FA &
7. 8401 LAME NOMH NO., SUME 211 LAME NOMH, FL 33467 (Street Address of Principal Office)
(Street Address of Principal Office) のない につく いっこう
8. If limited liability company is a manager-managed company, check here \(\sum_{\text{company}} \)
9. The name and usual business addresses of the managing members or managers are follows:
OURMILLA SHARHA
SATYANAMA SHARMA
STATISTICS (1)
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a 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:
PMVATE EQUITY LENDING
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.)
LAWNERLE CAPLAN
Typed or printed name of signee

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 of the	Limited Liability Comp	any is:			
	AA EQUITY LENDIN	16,cc	· · · · · · · · · · · · · · · · · · ·	···	
If name unavailable	e, the alternate name to b	e used in the s	tate of Florida is:		
	UMIVENSAL EQUIT	Y LENDING	b, cel	··	
2. The name and the	ne Florida street address o	of the registere	ed agent and office	SECRE TALLAH	
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	10.00.00.4.4.4	- 01.1A	0 1 mm = 1 m0	OF ST.	_
. —	1900 CON ORS	ress (P.O. Box	NOT ACCEPTABLE)	ERA OM A	ָר רְיַּר רְיִּר
N	BOCA RAYON	FL	3343/		
		· City/State/Z	ip		
•					

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)

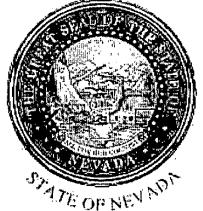
\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, ROSS MILLER, the Nevada Secretary of State, do hereby certify that AA EQUITY LENDING, LLC did on April 30, 2008, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.

By

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 30, 2008.

ROSS MILLER Secretary of State

Certification Clerk

