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ACCOUNT NO. : I2000000195

REFERENCE : 355138 8019691

AUTHORIZATION :

COST LIMIT :

ORDER DATE: October 28, 2014

ORDER TIME : 9:16 AM

ORDER NO. : 355138-001

CUSTOMER NO: 8019691

FOREIGN FILINGS

NAME: RRML CAPITAL RESOURCES LIMITED

LIABILITY COMPANY

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ____ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

SUBJECT:	RRML CAPITAL RESOURCES LIMITED LIABILITY COMPANY Name of Limited Liability Company
	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;" Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return a	all correspondence concerning this matter to the following:
	Lenford L. Robins
	Name of Person
	RRML CAPITAL RESOURCES LIMITED LIABILITY COMPANY
	Firm/Company
	1 Bridge Plaza North , Ste #275 ≧兽 ⇄
	Address
	Fort Lee, NJ 07024
	City/State and Zip.Code
	lenr@rrml.us.com
	E-mail address: (to be used for future annual report notification)
For further inf	ormation concerning this matter, please call:
Le	enford L. Robins at (201 Area Code) Daytime Telephone Number
,	Name of Contact Person Area Code Daytime Telephone Number
Divis Regis P.O.	LING ADDRESS: ion of Corporations bration Section Box 6327 hassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is □\$1	a check for the following amount: 25.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee \& \Bigcup \\$155.00 Filing Fee \& \Bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: RRML CAPITAL RESOURCES LIMITED LIABILITY COMPANY (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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. New Jersey 26-3685638 (FEL number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1 Bridge Plaza North Suite 275 Fort Lee, NJ, 070204 (Street Address of Principal Office) 1 Bridge plaza North Suite 275 Fort Lee NJ 07024 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are. Lenford L. Robins, Managing Member 1 Bridge Plaza North, Suite 275, Fort Lee, NJ 07024

8. 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)

Signature of an authorized person

(In accordance with section 605.0203; F.S., 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.)

Lenford L. Robins, Member

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable	e, the alternate to be used i	in the state of Florida is:			
2. The name	and the Florida street add	ress of the registered agent and office are:	TACA ACA	₹	
	Corporation Service Cor	npany		1	
		(Name)		(J)	-
	1201 Hays Street		二: 表:1	ψņ 2.4	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		52:11	<u>o</u> 1	
	Tallahassee	FL 32301			
	· · · · · · · · · · · · · · · · · · ·	City/State/Zip			

Corporation Service Company

By:

(Signature)

Courtney Williams

Asst. Vice President

Statutes.

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

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

RRML CAPITAL RESOURCES LIMITED LIABILITY COMPANY

0400257908

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on November 10, 2008.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Lenford Robins
1 Bridge Plaza North
Suite 275
Fort Lee, NJ 07024



Certification# 134066965

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 3rd day of November, 2014



Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR StandingCert/JSP/Verify Cert.jsp