2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M01000000588

Entity Name: GENIE PORTFOLIO MANAGEMENT, LLC

FILED Nov 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18340 N.E. 76TH STREET REDMOND, WA 98052

Current Mailing Address: New Mailing Address:

500 POST RD EAST C/O TEREX CORPORATION SUITE 320 200 NYALA FARM ROAD WESTPORT, CT 06880 WESTPORT, CT 06880

FEI Number: 91-2092048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JANE S. KRAYER

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: GENIE FINAN. SERV. (, ERIC I. COHEN: V P/S) Name: GENIE FINAN. SERV. (, ERIC I. COHEN: V P/S)

 Address:
 500 POST RD EAST SUITE 320
 Address:
 200 NYALA FARM ROAD

 City-St-Zip:
 REDMOND, WA 98052
 City-St-Zip:
 WESTPORT, CT 06880

Title: MGRM () Delete Title: () Change () Addition

Name:GE COMMERCIAL FINANC, E BUSINESS PRO P CORPName:Address:10900 NE 4TH STAddress:City-St-Zip:BELLEVUE, WA 98004City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ERIC I. COHEN MGRM 11/07/2007