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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

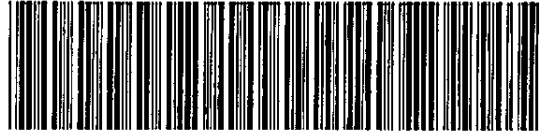
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W05-4928

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01/19/05--01053--022 **78.75

SEC. OF STATE
TALLAHASSEE, FLORIDA

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SAFDIÉ

Investment Services Corp.

Member NASD/SIPC

320 Park Avenue • New York, NY 10022
212-457-8600

February 7, 2005

Florida Department of State
Registration Section
Division of Corporations
Attn: Jason Merrick
409 E. Gaines Street
Tallahassee, FL 32314

Dear Mr. Merrick:

SAFDIÉ Investment Services Corp. is enclosing the corrected and signed "Application by Foreign Corporation for Authorization to Transact Business in Florida". We have already enclosed an original "Certificate of Existence" along with a check for \$78.75 for the filing fee and for a "Certificate of Status" to be mailed to us. If this request can be expedited, we would greatly appreciate this.

If you have any other questions, please contact me at 212-457-8657.

Sincerely,

SAFDIÉ Investment Services Corp.

Roberta Rosenblatt
Executive Assistant

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

January 31, 2005

PATRICIA CAPPETO
320 PARK AVENUE, 21ST FL.
NEW YORK, NY 10022

SUBJECT: SAFDIE INVESTMENT SERVICES CORP.
Ref. Number: W05000004928

We have received your document for SAFDIE INVESTMENT SERVICES CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 605A00006749

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations **SAFDIÉ Investment Services Corp.**

SUBJECT: _____
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Patricia Cappeto
(Name of Person)

SAFDIÉ Investment Services Corp.
(Firm/Company)

320 Park Ave., 21st Fl.
(Address)

New York, NY 10022
(City/State and Zip code)

For further information concerning this matter, please call:

Patricia Cappeto at *(212) 457-8620*
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. SAFDIÉ Investment Services Corp.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York State 3. _____
(State or county under the law of which it is incorporated) (FBI number, if applicable)

4. 4/14/2000 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 0 Upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 320 Park Ave 21st Fl. NY NY 10022
(Principal office address)

(Current mailing address)

8. Broker Dealer
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Alberto Sisso

Office Address: 1250 E. Hallandale beach Blvd
Hallandale Beach, Florida 33009
(City) (Zip code)

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TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Director: ~~Vice Chairman:~~ Marcia Safdie

Address: 320 Park Ave, NY, NY 10022

Director: Marc Hauser

Address: 320 Park Ave NY, NY 10022

Director: Keith Schneider

Address: 320 Park Ave NY, NY 10022

B. OFFICERS

President: Keith Schneider

Address: 320 Park Ave NY NY 10022

COO: Patricia Cappeto
Vice President:

Address: 320 Park Ave NY, NY 10022

Secretary: _____

Address: _____

FINCP: David Gilman
Treasurer:

Address: 320 Park Ave, NY, NY 10022

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TALLAHASSEE, FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]
(Signature of Director or Officer listed in number 12 of the application)

14. Patricia Cappeto Chief Accounting Officer
(Typed or printed name and capacity of person signing application)

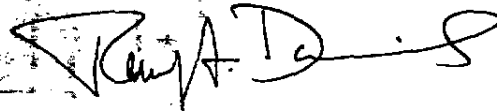
[Signature]
Keith P. Schneider
President

State of New York } ss:
Department of State

I hereby certify, that the Certificate of Incorporation of SAFDIE INVESTMENT SERVICES CORP. was filed on 04/14/2000, under the name of CBNY INVESTMENT SERVICES CORP., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment CBNY INVESTMENT SERVICES CORP., changing its name to SAFDIE INVESTMENT SERVICES CORP., was filed 11/25/2003.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 12th day of January
two thousand and five.



Secretary of State