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FOREIGN PROFIT/NONPROFIT CORPORATION

SIG Financing, Inc.

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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. SIG FINANCING, INC.
(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. DELAWARE 3. 20-0061694
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/20/2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. One Commerce Center, 1201 N. Orange Street, S-715, Wilmington, DE 19801
(Principal office address)
Same as above
(Current mailing address)

8. To act as a holding company.
(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: CT Corporation System
 Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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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.

By:  VickiAnn Owens
(Registered agent's signature) Special Assistant Secretary

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:

FL015 - 0203/2004 CT System Online

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: Joel Greenberg

Address: 401 City Avenue, S-220

Bala Cynwyd, PA 19004

Director: Jeffrey Yass

Address: 401 City Avenue, S-220

Bala Cynwyd, PA 19004

Director: Arthur Dantchik

Address: 401 City Avenue, S-220

Bala Cynwyd, PA 19004

B. OFFICERS

President: Jeffrey Yass

Address: 401 City Avenue, S-220

Bala Cynwyd, PA 19004

Vice President: Joel Greenberg

Address: 401 City Avenue, S-220

Bala Cynwyd, PA 19004

Secretary: Joel Greenberg

Address: 401 City Avenue, S-220, Bala Cynwyd, PA 19004

Treasurer: Brian Sullivan

Address: 401 City Avenue, S-220, Bala Cynwyd, PA 19004

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. Joel Greenberg, Vice President and Secretary

(Typed or printed name and capacity of person signing application)

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[Handwritten signature]

Delaware

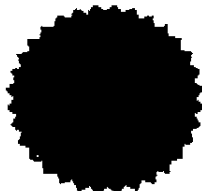
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIG FINANCING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3673869 8300

AUTHENTICATION: 4560168

060205621

DATE: 03-01-06