Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GM FINANCIAL GROUP

Account Number : Il9980000102

: (954)428-8899

Fax Number

: (954)428-6699

EXAMINER

FLORIDA/FOREIGN LIMITED LIABILITY CO.

STOCKVADER, LLC

Certificate of Status Certified Copy 0 04 Page Count \$125.00 Estimated Charge

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H08000131237 3

Articles of Organization of

STOCKVADER, LLC

a Florida Limited Liability Company

The undersigned organizer(s) for the purpose of forming a Limited Liability Company under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be:

STOCKVADER, LLC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of the limited liability company shall be:

10594 EAST KEY DRIVE BOCA RATON, FL 33498

Filer:
GM Financial Group Limited, Inc.
c/o Barbara Klupt
1191 E. Newport Center Drive
Suite 103
Deerfield Beach, FL 33442

2008 MAY 16 PH 1: 35
SECRETARY OF STATE
TAIL AHASSEE, FLORION

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(954) 428-8899 (954) 428-6699 Fax

ARTICLE 111 - Registered Agent The name and address of registered agent is:

STEVE KOIFMAN 10594 EAST KEY DRIVE BOCA RATON, FL 33498

Having been named as registered agent and to accept service of process for the above 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,F.S.

ARTICLE IV - Name and Address of Manager(s)

Title: Name and Address:

JENNIFER ROMANO - MANAGER 10594 EAST KEY DRIVE BOCA RATON, FL 33498

STEVEN KOIFMAN - MANAGER 10594 EAST KEY DRIVE BOCA RATON, FL 33498

ARTICLE V - AMENDMENTS

The limited liability company reserves the right to amend, alter, change, or repeal any provision in these Articles of Organization, or in any amendment hereto, or to add any provision to these Articles of Organization or to any amendment hereto, in any mainer now or hereafter prescribed or permitted by the provisions of any applicable statute of the State of Florida, and all rights conferred upon manager(s) in these Articles or any amendment hereto

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PAGE 09/10 # 6/11

H08000131237 3

are granted subject to this reservation.

ARTICLE VI - PURPOSES

Business Purpose: Consulting

ARTICLE VI - POWERS OF LIMITED LIABILITY COMPANY

The Limited Liability Company shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Organization.

ARTICLE VII - TERM OF EXISTENCE

This limited liability company shall have perpetual existence.

ARTICLE VIL- EFFECTIVE DATE

These Articles of Organization shall be effective immediately upon approval of the Secretary of State, State of Florida.

THE UNDERSIGNED Manager(s), for the purpose of forming a limited liability company under the laws of the State of Florida, has executed these Articles of Organization

) 1.0

ENNIFER ROMANO STEVEN KOIFMAN

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.407, Florida Statutes, the undersigned limited liability company organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Limited Liability Company is:

STOCKVADER, LLC

2. The registered agent and office is:

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 accepted 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.

KOFMAN