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COVER LETTER

TO: Registration Division of (Section Corporations		
_{subject:} Gran	ger Capital, LLC		
50B0E011		Liability Company)	
The enclosed Articles	of Organization and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
Breck R.	Granger		
	(1)	Vame of Person)	
Granger	Capital, LLC		
-	(F	Firm/Company)	
540 NE 4	14th Street, Suite 14		
 		(Address)	_
Boca Ra	ton, FL 33431		
For further information	(City/ in concerning this matter please of	State and Zip Code)	
Breck R. Gra	nger	_{at} 561 283-4245	·
(Na	me of Person)	(Area Code & Daytime Telepi	hone Number)
Enclosed is a check	for the following amount:	_	
\$125.00 Filing Fee	✓\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	6160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Granger Capital, LLC (Must end with the words "Limited Liability or Capital C	ity Company "LLC." as "LLC."		
(Must end with the words "Limited Liabili	ity Company, "L.L.C.," or "ELC.")		
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Comp	any is:	
Principal Office Address:	Mailing Address:		
540 NE 44th Street, Suite 14	540 NE 44th Street, Suite 14		
Boca Raton, FL 33431	Boca Raton, FL 33431		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the re Alyson R. Dachelet, Name	ered Agent. You must designate an individual or another egistered agent are:	DIVISION 6	つてつつこせ
888 SE THIRD AVE	NUE, SUITE 400 lress (P.O. Box NOT acceptable)	ARY OF STATE	
FORT LAUDERDALI	` ,	∵	
City, State, a		8 등	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	caccept service of process for the above stated this certificate, I hereby accept the appointment of the Interest of the provision of the prov	nt as ns of all h and	
Registered Agent's Signatu	ure (REQUIRED)		

(CONTINUED) Page 1 of 2 ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Breck R. Granger 540 NE 44th Street, Suite 14
	Boca Raton, FL 33431
MGRM	Alexandra D. Stern
	540 NE 44th Street, Suite 14
	Boca Raton, FL 33431
(Use attachment if necessary)	
LE V: Effective date, if other than t	the date of filing: 12/08/08 . (OPTIO

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Alyson R. Dachelet, Esq.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)