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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TAIT A HASSEE, FLORIDA

J. BRYAN
MAR 31 2009
EXAMNER

COVER LETTER

Registration Section

Division of Co	prporations		
_{SUBJECT:} Merge	nce Real Estate F	inancial Services, LL	C
	(Name of Limit	ed Liability Company)	<u>.</u>
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
Lynn Hube	ert		
		(Name of Person)	
Mergence	Real Estate Fina	ncial Services, LLC	₹ <i>a</i> .
		(Firm/Company)	MAR TO A HIT
2332 Gali	ano Street, 2nd Fl	oor	芸芸の一
		(Address)	SER P
Coral Gab	oles, FL 33134		PH 2:2:
		y/State and Zip Code)	AATE ORIDA
For further information	concerning this matter, pleas	e call:	
Lynn Hubert		at 305 774-000	5
(Name	of Person)	(Area Code & Daytime Tel	ephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 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 (Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Mergence Real Estate Financial So (Must end with the words "Limited Liabi				
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited L	iability C	ompa	ıny is:
Principal Office Address:	Mailing Address:			
2332 Galiano Street	2332 Galiano Street			
2nd Floor	2nd Floor	_	_	
Coral Gables, FL 33134	Coral Gables, FL 33134	-	_	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an indiv	vidual or ano	ther	
The name and the Florida street address of the	registered agent are:		99	
Lynn Hubert		>~	7.70 7.70	1 1
Name	· · · · · · · · · · · · · · · · · · ·	RETARY) MAR 30	MARKETI MARKETI
2332 Galiano Street	, 2nd Floor	Y 95	PK	m
Florida street ade	dress (P.O. Box NOT acceptable)	7 TO	⊃: ⊃:	

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 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.

Registered Agent's Signature (REQUIRED)

Coral Gables, FL 33134

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	Gelnovatch, Inc	
	714 Anastasia Avenue	
	Coral Gables, FL 33134	
MGRM	SJK Capital Advisors, Inc	
	16950 N. Bay Road, Unit 914	
	Sunny Isles Beach, FL 33160	
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days after the date of filing.)	specific and cannot be more than five business	ua;
and a mind of the self		
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.)

Lynn Hubert

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)