

L09000115148

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(Business Entity Name)

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B. KOHR
DEC - 3 2009
EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 12/03/09

REF. #: 000638.115610

CORP. NAME: CHECKERS CAPITAL, LLC

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- | | | |
|------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 532788 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|----------------------------------------------------|-------------------------------------------------------|---------------------------------------------|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

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ARTICLES OF ORGANIZATION

OF

CHECKERS CAPITAL, LLC

(Under Section 407 of the Florida Limited Liability Company Act)

The undersigned person, acting as an organizer of the limited liability company hereinafter named, sets forth the following statements.

ARTICLE I: The name of the limited liability company (the "Company") is:

Checkers Capital, LLC

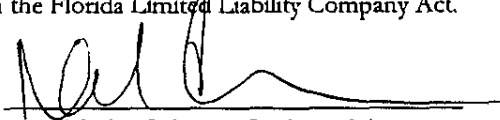
ARTICLE II: The mailing address and street address of the principal office of the Company is:

209 Bermuda Lane
Palm Beach, Florida 33480

ARTICLE III: The name and the Florida street address of the registered agent are:

Nicholas Coleman
209 Bermuda Lane
Palm Beach, Florida 33480

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 the Florida Limited Liability Company Act.

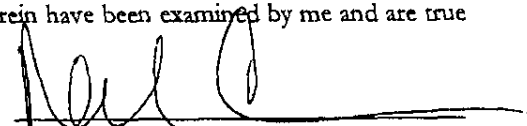

Nicholas Coleman, Registered Agent

ARTICLE IV: The name and address of the managers of the Company are:

Nicholas Coleman, 209 Bermuda Lane, Palm Beach, Florida 33480
Justin M. Farley, 170 East 87th Street, Apt. W11F, New York, New York 10128

IN WITNESS WHEREOF, I have signed this document on the date set forth below and do hereby affirm, under penalties of perjury, that the statements contained herein have been examined by me and are true and correct.

Signed this 3rd day of December, 2009


Nicholas Coleman, Member