

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Gala Financial, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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FEB 13 2012

Fax Message

To: '18506176383'
Fax: 18506176383
From: Debby Opperude
Greenspoon Marder, P.A.
Date: 2/13/2012 5:29 PM
Pages: 1 of 6 (including this page)
Subject: Articles of Organization

**ARTICLES OF ORGANIZATION
OF
GALA FINANCIAL, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is Gala Financial, LLC.

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 5055 Collins Avenue, Suite 3G, Miami Beach, Florida 33140.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this Limited Liability Company is Greenspoon Marder, P.A., 100 W. Cypress Creek Road, Suite 700, Fort Lauderdale, Florida 33309.

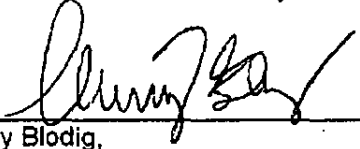
ARTICLE V - Management:

The Limited Liability Company is to be managed by a manager or managers and the name and address of the initial manager who is to serve as manager is:

Veronica Aguilar
5055 Collins Avenue
Suite 3G
Miami Beach, Florida 33140

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Whereof, the undersigned member has executed these Articles the 13th day of February, 2012.



Gregory Blodig,
Authorized Representative of Member

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

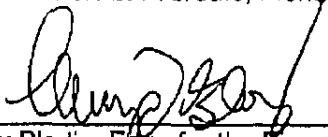
PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

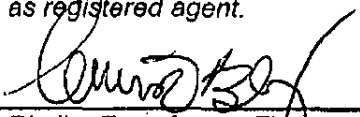
Gala Financial, LLC

2. The name and address of the registered agent and office is:

Greenspoon Marder, P.A. (the "Firm")
100 W. Cypress Creek Road, Suite 700
Fort Lauderdale, Florida 33309

By: 
Gregory Blodig, Esq., for the Firm

The Firm 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, the Firm hereby accepts the appointment as registered agent and agrees to act in this capacity. The Firm further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and I am familiar with and accept the obligations of its position as registered agent.



Gregory Blodig, Esq., for the Firm (Signature) February 13, 2012 (Date)

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