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COVER LETTER

TO:

Registration Section Division of Corporations

SURJECT

Gotham Asset Management, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Michael Chen	
Name of Person	
Firm/Company	
808 North Franklin Street, Unit 2410	
Address	
Tampa, FL 33602	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

William Michael Chen

240

462-6751

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Gotham Asset Management, LLC (Must end with the words "Limited Liability)	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
808 North Franklin Street, Unit 2410	808 North Franklin Street, Unit 2410	
Tampa, FL 33602	Tampa, FL 33602	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the rewilliam Michael Chen	red Agent. You must designate an individual or another	DIVISION
Name		FIA
808 North Franklin Street, Unit	2410	COE!
	ess (P.O. Box NOT acceptable)	25
Tampa, FL 33602	FL 20	
City, Stat	e, and Zip	Ž,
registered agent and agree to act in this capacit	is certificate, I hereby accept the appointment a ty. I further agree to comply with the provisions performance of my duties, and I am familiar wi	is s of ith

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Ma "MGRM" = M	anager Managing Member	Name and Address:	
MGR		William Michael Chen	
		808 North Fraknlin Street, Unit 2410	
		Tampa. FL 33602	
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