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- COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Murcielago Capital Manag	ement, LLC	
(Name of Lin	nited Liability Company)	
The enclosed "Application by Foreign Limited Li Florida," Certificate of Existence, and check are sliability company to transact business in Florida	submitted to register the above referenced forei	
Please return all correspondence concerning this	matter to the following:	
Todd A. Johnston		
	ame of Person)	_
Murcielago Capital Manag	gement, LLC	OT AUG
(F	irm/Company)	智智
2496 Eagle Run Drive		OT AUG 22 AM II: 05 SECRETARIO GENERAL STATE
	(Address)	語い
Weston, FL 33327		፝ ፟ ድ
(City/S	State and Zip Code)	
For further information concerning this matter, pl	lease call:	
Todd A. Johnston	at (954) 558-7750	
(Name of Person)	at (954) 558-7750 (Area Code & Daytime Telephone Num	ber)
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\int \\$125.00 \text{ Filing Fee} \int \\$130.00 \text{ Filing Fee & Certificate of the following amount:}		Certificate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Murcielago Capital Management, LL	С
(Name of Foreign Limited Liability Company; must inc	clude "Limited Liability Company," "L.L.C.," or "LLC.")
Murcielago Capital Investments, LLC	
	pose of transacting business in Florida and attach a copy of the written ternate name. The alternate name must include "Limited Liability
₂ Indiana	3 26-0649405
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable) 5. Perpetual
_{4.} July 19, 2007	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. None	and the second s
(Date first transacted business in I (See sections 608.501 & 608.502 F.	Florida, if prior to registration.) S. to determine penalty liability)
7. 3400 West Riggin Road, #17	
Muncie, IN 47304-6169	
(Street Addres	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
Todd A. Johnston, CEO & Managing	g Director
2496 Eagle Run Drive	
Weston, FL 33327	
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photocotranslation of the certificate under oath of the translator must be su	
11. Nature of business or purposes to be conducted	or promoted in Florida: Provide services
for investments and trading in capital markets and re	eal estate.
(In accordance with section 608:408(3);	uthorized representative of a member. F.S., the execution of this document constitutes erjury that the facts stated herein are true.)

Typed or printed name of signee

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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
Murcielago Capital Management, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
Murcielago Capital Investments, LLC	2
2. The name and the Florida street address of the registered agent and office are:	OT NIG 22
Todd A. Johnston	#11:05
(Name)	59
2496 Eagle Run Drive	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Weston, FL 33327 FL City/State/Zip	

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 positifn as registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

MURCIELAGO CAPITAL MANAGEMENT, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on July 19, 2007, and was in existence or authorized to transact business in the State of Indiana on August 08, 2007.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hercunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eighth Day of August, 2007.

TODD ROKITA, Secretary of State

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