(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Oity/Otate/Ziph Hone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
L. SELLERS				
JUN 30 2008				
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EXAMINER				
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Office Use Only

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SECRETURY OF THAT

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Gator Capital Management, LLC						
	(Name of Lim	ited Liability Company)				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida						
Please return all correspondence concerning this matter to the following:						
	Derek Pilecki					
(Name of Person)						
Gator Capital Management, LLC						
		m/Company)				
	3001 N Rocky Point Dr E,	2nd Floor				
		(Address)				
	Tampa, FL 33607					
		ate and Zip Code)				
For further information concerning this matter, please call:						
Dere	ek Pilecki	_ at (813) 282-7870				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Divisi P.O. I	LING ADDRESS: ion of Corporations Box 6327 nassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	check for the following amount: 5.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of	\$155.00 Filing Fee & \$\sum \\$160.00 Filing Fee, Certificate of Status & Certified Copy				



June 16, 2008

DEREK PILECKI 3001 N. ROCKY POINT DRIVE E. 2ND FLOOR TAMPA, FL 33607

SUBJECT: GATOR CAPITAL MANAGEMENT, LLC

Ref. Number: W08000029110

We have received your document for GATOR CAPITAL MANAGEMENT, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 908A00036696

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:			
1 Gator Capital Management, LLC	_		_
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of	r "LLC."	')	-
Gator Capital, LLC			_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attac consent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C.," "LLC.")	h a copy "Limited	of the I Liabil	written lity
2. Delaware 3. 26-2325167.			_
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	i		
4. 4/2/2008 5. perpetual			•
(Date of Organization) (Duration: Year limited liability companexist or "perpetual")	y will cea	ase to	
will not do business until registration is received			_
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)			
7. 3001 N Rocky Point Dr E, 2nd Floor			-
Tampa, FL 33607			_
(Street Address of Principal Office)			
8. If limited liability company is a manager-managed company, check here			
9. The name and usual business addresses of the managing members or managers are as fol	lows:		
Derek Pilecki			_
3001 N Rocky Point Dr E, 2nd Floor			_
Tampa, FL 33607			_
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: registered involved.	gn langua	age, a	
		<u> </u>	
Dorch S. Pelmi		3	Andread .
Signature of a member or an authorized representative of a member.	2017.	PN 나 20	; • 1 ; ====)
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	735 <u>~</u>		A thing safe
Derek S. Pilecki	- nhm	0.	
Typed or printed name of signee			

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Gator Capital Management, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Delaware
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
Gator Capital, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 6/12/2008
Signature(s) of Manager(s) and/or Managing Member(s):
Jem 5 Peri

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:		•
Gator Capital Management, LLC		·····
If name unavailable, the alternate name to be used in the state of Florida is:		
Gator Capital, LLC		
2. The name and the Florida street address of the registered agent and office are:		
Derek Pilecki		
(Name)		
3001 N Rocky Point Dr E, 2nd Floor		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Tampa, FL 33607 FL		
City/State/Zip		
Having been named as registered agent and to accept service of process for the above staliability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida Sta	ent a Il sta I acc	s registered atutes cept the
Jew Plui	77, 151	
(Signature)	-	C common

\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00 \$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GATOR CAPITAL MANAGEMENT, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JUNE, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GATOR CAPITAL MANAGEMENT, LLC" WAS FORMED ON THE SECOND DAY OF APRIL, A.D. 2008.

O PH 4: 20

4528312 8300

080723517

AUTHENTICATION: 6682614

You may verify this certificate online at corp.delaware.gov/authver.shtml

DATE: 06-24-08

Harriet Smith Windsor, Secretary of State