

REFERENCE

344427

4349066

AUTHORIZATION

COST LIMIT

390 Ourcia 1

ORDER DATE : August 17, 1999

ORDER TIME : 10:21 AM

ORDER NO. : 344427-005

CUSTOMER NO: 4349066

CUSTOMER: Ms. Gabrielle M. Kissane

Mccabe & Flynn Llp 1 Whitehall St.

Suite 1825

New York, NY 10004

FOREIGN FILINGS

NAME:

VIEWTRADE SECURITIES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ___ CERTIFIED COPY - TWO COPIES
___ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

Si 20-99

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99 AUG 18 AN II: 27

DEPARTMENT OF STATE
TALLAHASSEE, FI CATLINIC



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 18, 1999

CSC

SUBJECT: VIEWTRADE SECURITIES LLC

Ref. Number: W99000019195



I certify from the records of this office that VIEWTRADE SECURITIES LLC, is a limited liability company organized under the laws of the State of Florida, filed on August 18, 1999.

The document number of this company is W99000019195.

I further certify that said company has paid all fees due this office through December 31, , and its status is active.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida / Windows within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filling year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

If the limited liability company will be managed by a manager or managers, a statement to that effect is required as well as the names and street addresses of such managers who are to serve as managers; or if the management is reserved to the members, a statement to that effect is required as well as the names and street addresses of the managing members.

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

If you have any questions concerning the filing of your document, please call (850) 487-6043.

²Shawn Logan

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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.	Viewtrade Securities LL			2 PT 2 PT 2		
	(Name of foreign limited liability company my so contained in the name at present.)	ust end with the we	uds "limited company" or	their abbreviati	on "L.C." if	not
2	Delaware	3.	13-4040824			· ·
•	(Jurisdiction under the law of which foreign li- company is organized)	imited liability	(FEI mimber,	if applicable)		
1.	December 7, 1998	.5.	perpetual	·		·
	(Date of Organization)		(Duration: Year limited I: exist or "perpetual")	ability compan	y will cease	10
, ,	upon qualification		<u>-</u>			- =
	(Date first transacted business in	n Florida (See seeti	ons 608.501, 608.502, and 8	(17.155, F.S.)	 ;	
٠.	99 Wall Street, New Yor	ck, NY 10005				
	•	(Street address of pri	•	-		
Ľi	ist name, title, and business address of	of each managin	ne memberIMGRM1	ur managerli	MGRIJUNG	
Li wi	ist name, title, and business address ovill manage the foreign limited liability	of each managing of company in t	ng member[MGRM] (Torida: (attach additic	or manager[] onal page if	MGR]who necessary)	
Li w	ist name, title, and business address covill manage the foreign limited liability NAME & ADDRESS:	of each managing company in t	ng member[MGRM] of lorida: (attach addition NAME & ADDRE	mal page if	MGR]whonccessary)	
Li w	vill manage the foreign limited liability	y company in I	lorida: (attach additic	mal page if	nccessary)	
Li w	vill manage the foreign limited liability NAME & ADDRESS:	y company in t	lorida: (attach additic	mal page if	nccessary)	
Li w	vill manage the foreign limited liability NAME & ADDRESS: James St. Clair	y company in t	lorida: (attach additic	mal page if	nccessary)	
ILi W	vill manage the foreign limited liability NAME & ADDRESS: James St. Clair 999 SW 21st Street	y company in t	lorida: (attach additic	mal page if	nccessary)	
ILi w	vill manage the foreign limited liability NAME & ADDRESS: James St. Clair 999 SW 21st Street	y company in t	lorida: (attach additic	mal page if	nccessary)	
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Li	vill manage the foreign limited liability NAME & ADDRESS: James St. Clair 999 SW 21st Street	y company in t	lorida: (attach additic	mal page if	TITLE:	

^{9.} Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Scoretary of State or the proper official, having enstudy of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate in in a foreign language, a translation of the certificate under oath of the translation must be submitted.)

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:	
	Viewtrade Securities LLC	
2.	The name and the Florida street address of the registered agent and office are:	-
	James St. Clair (Name)	
	999 SW 21st Street Florida street address (P.O. Box NOT ACCEPTABLE)	.
	Boca Raton, FL 33486 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 position as registered agent.

(Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The	member	or	authorized	representati	ve of	a member	of _	Viewtrade	Securities
 	-1-12-1-					certifies:			
1) tì	ne above r	ame	d limíted liab	ility company	has et l	east one mer	nber,		
2) th	ne total an	nount	of cash cont	ributed by the	membe	r(s) is			\$200,000
(4	A descript	ion o	d value of pro f the property	operty other ti via attached a	nan cash nd made	contributed a part heret	by me o.)	mber(s) is	\$ <u>-0-</u>
þ	ie total an y member	(s) is	}	property conti from 2 and 3		and anticipat	ed to b	e contributed	\$ 200,000
	(1/2		7			
	•	\$	ignature of (In accordance affidavit consti- stated herein an	member or with section 60s tutes an affirmati c true.)	an Auti 3,408(3), 1 ion under	norized rept Florida Statules the penalties o	esenti the ex t perjur	ative of a met ecution of this y that the facts	nber.
		J	ames St.	Clair, CF	o/cco				
	•			Typed	or print	ed name of s	ignee		-

Filing Fee: \$250.00 for Application and Affidavit

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SECRETA-Y/UF STATE
TAIL SHASSEF FLORIDA

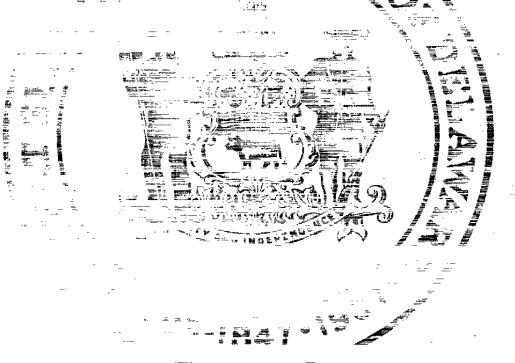
State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIEWTRADE SECURITIES 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 SEVENTEENTH DAY OF AUGUST, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
BEEN PAID TO DATE.



2975316 8300 991342697



9925865

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE: