

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF FORMATION OF "BOX OPTIONS EXCHANGE

LLC", FILED IN THIS OFFICE ON THE TWENTY-SIXTH DAY OF AUGUST,

A.D. 2010, AT 12:22 O'CLOCK P.M.

4864737 8100

100860785

Jeffrey W. Bullock, Secretary of State **AUTHENT CATION:** 8194973

DATE: 08-26-10

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

State of Delaware Secretary of State Division of Corporations Delivered 12:52 PM 08/26/2010 FILED 12:22 PM 08/26/2010 SRV 100860785 - 4864737 FILE

## CERTIFICATE OF FORMATION

OF

## BOX OPTIONS EXCHANGE LLC

This Certificate of Formation of BOX Options Exchange LLC, dated as of August **Z6**, 2010, is duly executed and filed by Lisa Fall, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 <u>Del. C.</u> §18-101, et seq.).

FIRST: The name of the limited liability company is:

**BOX Options Exchange LLC** 

SECOND: The address of its registered office in the State of Delaware is 2711 Centerville Road, Suite 400, Wilmington, Delaware 19808, in the County of New Castle. The name of its registered agent at such address is Corporation Service Company.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation of BOX Options Exchange LLC this 26 day of August, 2010.

Name: Lisa Fall

Title: Authorized Person