M0200003259

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800009284008









ACCOUNT NO. : 072100000032

REFERENCE: 844574

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: December 5, 2002

ORDER TIME : 10:18 AM

ORDER NO. : 844574-040

CUSTOMER NO: 7234387

CUSTOMER: Ms. Suzanne M. Kirchner

Capital Source

4445 Willard Avenue

12th Floor

Chevy Chase, MD 20815

FOREIGN FILINGS

NAME: CAPITALSOURCE FINANCE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Ginger Simmons -- EXT# 1139

EXAMINER:

7234387

S. F. L. B.



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 9, 2002

GINGER SIMMONS CSC TALLAHASSEE, FL

SUBJECT: CAPITALSOURCE FINANCE LLC

Ref. Number: W02000034469

We have received your document for CAPITALSOURCE FINANCE LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The Registered Agent -- CSC -- MUST SIGN the acceptance statement on the R.A. page.

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) 245-6914.

Letter Number: 802A00065115

Buck Kohr Corporate Specialist OR OF THE PARTY IS

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 RECISIER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Capital Source Finance LLC (Name of foreign limited liability company)
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 52-2243026 (FEI number, if applicable)
4. August 25, 2000 (Date of Organization) 5. June 28, 2007 (Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON Filing (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 4445 Willard Avenue
Chery Chase, Mary land 20815 (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 follows: Please See Attachmen +
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Provide Commercial Finance Services
Signature of a member or an authorized representative of a member. (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.)
John K. Delaner
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:
	Capital Source Finance LLC
2.	The name and the Florida street address of the registered agent and office are:
	Corporation Service Company (Name)
	Florida street address (P.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301 (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 as provided for in Chapter 608, F.S.

Lama R. Ders

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

CAPITALSOURCE FINANCE LLC MEMBERS AND MANAGER

CapitalSource Holdings, Inc.

4445 Willard Avenue Chevy Chase, MD 20815

CapitalSource Holdings LLC

4445 Willard Avenue Chevy Chase, MD 20815

CapitalSource Holdings, Inc.

4445 Willard Avenue Chevy Chase, MD 20815

JOHN K. DELANEY

CapitalSource Finance LLC 4445 Willard Avenue Chevy Chase, MD 20815

Member

Manager

<u>Member</u>

Member

CEO

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAPITALSOURCE FINANCE 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 SIXTH DAY OF DECEMBER, A.D. 2002. AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAPITALSOURCE

FINANCE LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF AUGUST, FA.D.

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



3275214

8300

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 2128352

020749449 DATE: 12-06-02