## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Account Number : 075350000132 Phone : (305)374-7580 Fax Number : (305)351-2122

Attn: Lalaine Landau (32259)

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Email Address: thekla.salzman@rialtocapital.com

NE DEIVED 10 JAN 29 RN 29 SS SECHELLY OF STATE ALLAHASSEE FLORIDA

### FLORIDA/FOREIGN LIMITED LIABILITY CO. RL CML 2009-1, LLC

Certificate of Status	1
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Page Count	03
Estimated Charge	\$160.00

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EXAMINER

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

	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	A F	OREIGN
1	RL CML 2009-1 LLC		
	RL CML 2009-1, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C."	}	<del></del>
COI	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy on sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited impany," "L.L.C," "LLC.")	of the Liab	- written ility
2.	DELAWARE  [Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	<u> </u>	<b>-</b>
(	(FEI number, if applicable) company is organized)		
4,	JANUARY 28, 2010  (Date of Organization)  5. PERPETUAL  (Duration: Year limited liability company will cear		
	(Date of Organization) (Duration: Year limited liability company will cease exist or "perpetual")	ie to	
6.	(Date first transacted business in Florida, if prior to registration.)	<u>_</u>	
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)		o ≥s
7.	700 N.W. 107 Avenue, Suite 400	=- -	- 20 - 20 -
	Mianti, PL 33 172	2	26 97_
	(Street Address of Principal Office)	Õ	
8.		Ī	70
9.	The name and usual business addresses of the managing members or managers are as follows:	7. S	RATIO
	RIALTO RL CML 2009-1, LLC	 	SNC
	700 N.W. 107 Avenue, Suite 400		_
	Miami, FL 33172		- <b>-</b>
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language slation of the certificate under oath of the translator must be submitted.)		cords in
11.	Nature of business or purposes to be conducted or promoted in Florida: Any and all business	SS	-
	or purposes permitted to be conducted or promoted under the laws of the State of Florid	<u>st</u>	
	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.)		
	DAVID SCHUBAUER, Authorized Representative		
	Typed or printed name of signee		

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## 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:
RL CML 2009-1, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
C T Corporation System (Name)
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation FL 33324
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, Florida Statutes.

C T Corporation System

(Signature)

Madonna Cuddihy
Special Assistant Secretary

\$ 100.00 Filing Fee for Application

5 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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# Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RL CML 2009-1, 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-EIGHTH DAY OF JANUARY, A.D. 2010.

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You may varify this certificate online at cosp.delaware.gov/authvar.shtml

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 7785111

DATE: 01-28-10