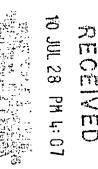
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(Requestor's Name)
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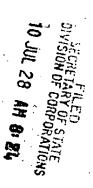
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B. KOHR

JUL 2 9 2010

EXAMINER





ACCOUNT NO. : I2000000195

REFERENCE : 460092 167868A

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : July 27, 2010

ORDER TIME : 9:25 AM

ORDER NO. : 460092-020

CUSTOMER NO: 167868A

FOREIGN FILINGS

NAME:

WELLS FARGO CAPITAL

FINANCE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX_____ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT# 2933

EXAMINER:

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE C	OF FLORIDA:
1. Wells Fargo Capital Finance, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company)	
(Name of Foreign Limited Liability Company; must include "Limi	ited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of tran consent of the managers or managing members adopting the alternate nam Company," "L.L.C.," "LLC.")	
Delaware 3 26-3	3469487
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. <u>11-13-2002</u> 5. perp	
(Date of Organization) (Dur exist	ation: Year limited liability company will cease to or "perpetual")
6. Confile	NO J
6. (Date first transacted by siness in Florida, if p (See sections 608.501 & 608.502 F.S. to deterr	rior to registration.) mine penalty liability)
7. 2450 Colorado Avenue, Suite 3000W	9 676
Santa Monica, CA 90404	9 2
(Street Address of Princip	pal Office)
8. If limited liability company is a manager-managed compar	ny, check here 🛛
9. The name and usual business addresses of the managing m	embers or managers are as follows:
Peter E. Schwab - 2450 Colorado Avenue, Suite 3	6000W, Santa Monica, CA 90404
Henry K. Jordan - 2450 Colorado Avenue, Suite 3	6000W, Santa Monica, CA 90404
David C. Hilton - 2450 Colorado Avenue, Suite 3	000W, Santa Monica, CA 90404
10. Attached is an original certificate of existence, no more than 90 days old, of the jurisdiction under the law of which it is organized. (A photocopy is not according to the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted.	ceptable. If the certificate is in a foreign language, a
Mittel	
Signature of a member or an authorized (In accordance with section 608.408(3), F.S., the exe an affirmation under the penalties of perjury that the	ecution of this document constitutes
	TROAN
Typed or printed name o	f 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: Wells Fargo Capital Finance, LLC	
If name unav	vailable, the alternate name to be used in the state of Florida is:
2. The name	e and the Florida street address of the registered agent and office are:
	Corporation Service Company (Name)
	1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee _{EI} 32301

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.

Corporation Service Company

Jeanine Reynolds

BY:

(Signature)

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

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WELLS FARGO CAPITAL 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 TWENTY-EIGHTH DAY OF JULY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WELLS FARGO CAPITAL FINANCE, LLC" WAS FORMED ON THE THIRTEENTH DAY OF NOVEMBER, A.D. 2002.

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

3590683 8300

DATE: 07-28-10

ICATION: 8138870

100779798 You may verify this certificate online at corp.delaware.gov/authver.shtml