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EXAMINER



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1 JUN 21 PH 4: 16

ASSOCIATED STATEMENT OF ST



ACCOUNT NO. : I2000000195

REFERENCE :

820087

4320946

AUTHORIZATION

COST LIMIT

ORDER DATE : June 21, 2011

ORDER TIME : 3:20 PM

ORDER NO. : 820087-015

CUSTOMER NO: 4320946

FOREIGN FILINGS

NAME:

2151 LANE AVENUE SOUTH

HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XXX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Name of Foreign Limited Lightling Company rous	st include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Poleign Dunked Diability Company, mes	is include similed matrice company, 17.5.5., or 655.
·	purpose of transacting business in Florida and attach a copy of the written the alternate name. The alternate name must include "Limited Liability
2. Maryland	3.
(Jurisdiction under the law of which foreign limited liab company is organized)	bility (FEI number, if applicable)
4, 6/17/2011	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. 6/20/2011	
(Date first transacted business (See sections 608,501 & 608,50	s in Florida, if prior to registration.) 02 F.S. to determine penalty liability)
7. c/o CWCapital, 7501 Wisconsin Avenue, Suit	te 500 West
Bethesda, MD 20814	
(Street Ac	ddress of Principal Office)
8. If limited liability company is a manager-man	naged company, check here 🔀
9. The name and usual business addresses of the	managing members or managers are as follows:
SEE ATTACHMENT	
10. Attached is an original certificate of existence, no more that	an 90 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photranslation of the contificate under each of the translation must be	otocopy is not acceptable. If the certificate is in a foreign language, a be submitted.)
11. Nature of business or purposes to be conduct	ted or promoted in Florida:
Rental and management of commercial proper	rty
5 .	e
	an authorized representative of a member.
	ne execution of this document constitutes an affirmation under the
penalues of perjury that the facts stated herein document to the Department of State cons	rare-true. I am aware that any false information submitted in astitutes a third degree felony as provided for in s.817.155, F.S.)
Sheena Thomas, Authorize	

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.

2151 Lane Avenue South Holdings, 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: Corporation Service Company (Name)	1. The name of the Limited Liab	ility Company is:
2. The name and the Florida street address of the registered agent and office are: Corporation Service Company	2151 Lane Avenue South Holdin	igs, LLC
Corporation Service Company (Name) 1201 Hays Street 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, Florida Statutes. Corporation Service Company By: Elizabeth Smith Assistant Vice President	If unavailable, the alternate to be	used in the state of Florida is:
In the 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, Florida Statutes. Corporation Service Company By: Elizabeth Smith Assistant Vice President	2. The name and the Florida stre	et address of the registered agent and office are:
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, Florida Statutes. Corporation Service Company By: Fitzabeth Smith Assistant Vice President	Corporation Serv	ice Company
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, Florida Statutes. Corporation Service Company By: Elizabeth Smith Assistant Vice President	**************************************	(Name)
Tallahassee FI 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, Florida Statutes. Corporation Service Company By: Elizabeth Smith Assistant Vice President	1201 Hays Street	
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3 25.00 Designation of Registered Agent	liability company at the place designed and agree to act in this caparelating to the proper and complete obligations of my position as registive Corporation Servi	agent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as registered city. I further agree to comply with the provisions of all statutes e performance of my duties, and I am familiar with and accept the tered agent as provided for in Chapter 608, Florida Statutes. The Company Elizabeth Smith Assistant Vice President
\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)		\$ 30.00 Certified Copy (optional)

ATTACHMENT

FLORIDA APPLICATION FOR REGISTRATION OF A FOREIGN LIMITED LIABILITY COMPANY

2151 LANE AVENUE SOUTH HOLDINGS, LLC

Item 9.

Sole Member/Manager's Name

Wells Fargo Bank, N.A., as Trustee for the registered holders of Deutsche Mortgage & Asset Receiving Corporation, COMM 2005-LP5 Commercial Mortgage Pass-Through Certificates

Member/Manager's Address c/o CWCapital Asset Management LLC 7501 Wisconsin Avenue, Suite 500 West Bethesda, MD 20814

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT 2151 LANE AVENUE SOUTH HOLDINGS, LLC, REGISTERED JUNE 17, 2011, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JUNE 21, 2011.

Paul B. Anderson Charter Division



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097