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CONTACT PERSON: Stephanie Milnes -- EXT# 2920

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_____ CERTIFICATE OF GOOD STANDING

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	T: ColFin Bulls Funding B, LLC	
	Name of Limited Liability Company	
The en-	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.	of la.,
Please	urn all correspondence concerning this matter to the following:	
	Linda Bodenstein	
	Name of Person	
	ColFin Bulls Funding B, LLC	
	Firm/Company	
	2450 Broadway, 6th Floor	
	Address	
	Santa Monica, CA 90404	
	City/State and Zip Code	
	lbodenstein@colonyinc.com	
	E-mail address: (to be used for future annual report notification)	
For fur	r information concerning this matter, please call:	
	tephanie Shaw at (310) 552-7253	
	tephanie Shaw at (310) 552-7253 Name of Person Area Code & Daytime Telephone Number	
	AILING ADDRESS: Division of Corporations Legistration Section O. Box 6327 Callahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclos	is a check for the following amount: 125.00 Filing Fee \$\int_{\text{S155.00}}\$130.00 Filing Fee \$\int_{\text{Certificate}}\$155.00 Filing Fee \$\int_{\text{Certified Copy}}\$\$ Certified Copy of Status & Certified Copy	

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:

L	INITED LIABILITY COMPAINT TO TRAINSACT BUSINESS IN THE STATE OF PLURILIA:
1	ColFin Bulls Funding B, LLC
•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
_	
(I	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
	onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
U	ompany," "L.L.C," "LLC.")
2	Delaware 3
۷.	Delaware 3. (FEI number, if applicable)
	company is organized)
	0.6/1.0/0.011
4.	06/17/2011 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to
	exist or "perpetual")
<	Upon filing
٠.	(Date first transacted business in Florida, if prior to registration.)
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)
_	2450 Decederate 6th Floor Conta Marris CA 00404
7.	2450 Broadway, 6th Floor, Santa Monica, CA 90404
	(Street Address of Principal Office)
3.	If limited liability company is a manager-managed company, check here
).	The name and usual business addresses of the managing members or managers are as follows:
	CDCF II ColCo Bulls Holding, LLC & CFI Bulls TRS Investor, LLC
	2450 Broadway, 6th Floor, Santa Monica, CA 90404
O	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
	nslation of the certificate under eath of the translator must be submitted.)
1	. Nature of business or purposes to be conducted or promoted in Florida: To hold and acquire
•	5.70 M
	real property in the state of Florida
	1 miles
	TIMON CONTONIUS SIZ
	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. I am aware that any false information submitted in accordance to the Department of State constitutes a third degree falony as provided for in a SIT-SSE E
	document to the Department of State constitutes a third degree felony as provided for in s.817755, F.S.7
	Linda Bodenstein, Authorized Signatory
	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:
ColFin Bulls Funding B, 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)
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: Stephanie Mulner Stephanie K. Milnes Assistant Vice President
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00 \$ 5.00

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "COLFIN BULLS FUNDING B, 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 FEBRUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COLFIN BULLS FUNDING B, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JUNE, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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AUTHENTICATION: 9346099

DATE: 02-06-12

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