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EXAMINER



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REFERENCE: 808800

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AUTHORIZATION

COST LIMIT

ORDER DATE : June 10, 2011

ORDER TIME : 2:05 PM

ORDER NO. : 808800-025

CUSTOMER NO: 4320946

FOREIGN FILINGS

NAME: 1900 POST ROAD HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

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 608.503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF HICKORY.

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. 1900 Post Road Holdings, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the we consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability and the consent of the managers or managing members adopting the alternate name.	
Company," "L.L.C," "LLC.")	y
2. Maryland (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4, 6/3/2011 _{5,} perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. 6/9/2011	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. c/o CWCapital, 7501 Wisconsin Avenue, Suite 500 West	
Bethesda, MD 20814	
(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:	
SEE ATTACHMENT	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recor	rls i
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:	
Rental and management of commercial property.	
Surana Themes	
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 a document to the Department of State constitutes a third degree fellow as provided for in \$ 817,155, E.S.).	

Typed or printed name of signee

Sheena Thomas, Authorized Representative

ATTACHMENT

FLORIDA APPLICATION FOR REGISTRATION OF A FOREIGN LIMITED LIABILITY COMPANY

1900 POST ROAD HOLDINGS, LLC

Item 9.

Sole Member/Manager's Name

Wells Fargo Bank, N.A., as Trustee for the registered holders of Credit Suisse First Boston Mortgage Securities Corp., Commercial Mortgage Pass-Through Certificates, Series 2003-CK2

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

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.

If uṇavailal	ble, the alternate to be used in	the state of Florida is:	
		<u> </u>	
2. The nan	ne and the Florida street addre	ess of the registered agent and office are:	
	Corporation Service Cor	npany	
		(Name)	
	1201 Hays Street		
•	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		City/State/Zip	
•	-	•	
liability com agent and ag relating to th	pany at the place designated i gree to act in this capacity. I f he proper and complete perfor	nd to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as reginant the appointment as reginant agree to comply with the provisions of all statutes mance of my duties, and I am familiar with and accept the ent as provided for in Chapter 608, Florida Statutes.	stere

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

Elizabeth Smith Assistant Vice President

STATE OF MARYLAND Department of Assessments and Taxation

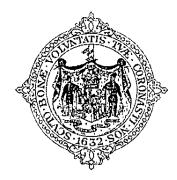
I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT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

I FURTHER CERTIFY THAT 1900 POST ROAD HOLDINGS, LLC, REGISTERED JUNE 03, 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 10, 2011.

Paul B. Anderson Charter Division

Paul B. Under



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

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