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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number: 075350000132 Phone: (305)374-7580

Fax Number : (305)351-2122

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MSCI 2006-HQ10 NAPLES RETAIL, LLC

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GRASSEE, FLORIDA

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EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION OF MSCI 2006-HQ10 NAPLES RETAIL, LLC

- 1. The name of the limited liability company is MSCI 2006-HQ10 NAPLES RETAIL, LLC.
- 2. The mailing address and the street address of the principal office of the limited liability company are c/o LNR Partners, Inc., 1601 Washington Avenue, Suite 700, Miami Beach, Florida 33139
- 3. The name and street address of the initial registered agent of the limited liability company are C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.
- 4. The limited liability company shall be managed by a manager. The name and address of the initial manager of the limited liability company are: LNE Partners, Inc., a Florida corporation, 1601 Washington Avenue, Suite 700, Minne Beach, Florida 33139.

IN WITNESS WHEREOF, these Articles of Organization have been executed by the below named authorized representative of the member of the limited liability companied tective as of the 10th day of June, 2009.

//s// Julia Kim

Julia Kim Authorized Representative

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H09000139884 3

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:	
MSCI 2006-HQ10 NAPLES RETAIL, LLC	
2. The name and the Florida street address of the registered agent and office are:	
C T Corporation System	
(Name)	•
1200 South Pine Island Road	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	₽ ′′ ≃
Plantation, Florida 33324	2009 JUN 1 1 SECRETAR'
City/State/Zip	JN TA
Having been named as registered agent and to accept service of process for the above stated tiability company at the place designated in this certificate. I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all startlating to the proper and complete performance of my duties, and I am familiar with and accordinations of my position as registered agent as provided for in Chapter 608, Florida Statute CT Corporation System By: (Signature)	limifelica sur limitelica sur registiered sur limitelica sur limit
Madonna Cuddihy	

Special Assistant Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)