

AUG-29-2012 WED 1:08 AM BILZIN SUMBERG
Division of Corporations

FAX: 3053747593

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Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet *Vivian R.22*

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXEROD
Account Number : 075350000132
Phone : (305) 374-7580
Fax Number : (305) 351-2122

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

CML-WA ELT, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

AUG 30 2012

L. SELLER

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION
OF
CML-WA ELT, LLC
(a Florida limited liability company)

1. The name of the limited liability company is CML-WA ELT, LLC.
2. The mailing address and the street address of the principal office of the limited liability company are:

730 NW 107th Avenue
Suite 400
Miami, FL 33172
3. The name and the Florida street address of the registered agent and office of the limited liability company are:

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324
4. The limited liability company is to be member-managed. The sole member of the limited liability company is Multibank 2009-1 CML-ADC Venture, LLC, a Delaware limited liability company.

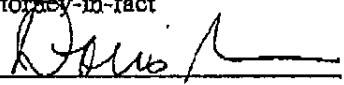
Dated: as of August 27, 2012.

SOLE MEMBER:

Multibank 2009-1 CML-ADC Venture, LLC,
a Delaware limited liability company

By: RL CML 2009-1 Investments, LLC, a
Delaware limited liability company,
its Manager

By: Rialto Capital Advisors, LLC, a
Delaware limited liability company,
its attorney-in-fact

By: 
Name: Doris Galczak
Its: Senior Manager - Legal Entities

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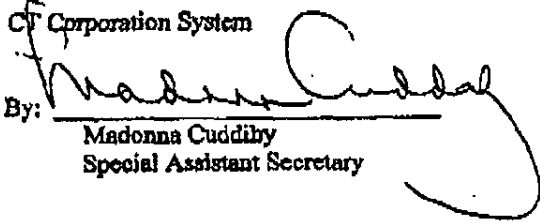
**ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT**

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.

Dated as of August 27, 2012

CF Corporation System

By:


Madonna Cuddihy
Special Assistant Secretary

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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