Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

**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. RREF ST-FL, LLC

Certificate of Status	0
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J. BRYAN

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4/1/2013

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CT CORPORATION

8656336092

COVER LETTER

TO: Registration Of	i Section Corporations		TALL DAY					
SUBJECT:	RREF	ST-FL, LLC	3,					
	(Name of Limited Liability Company)							
The enclosed Article	s of Organization and fee(s) are	submitted for filing.						
Please return all corr	espondence concerning this matt	er to the following:						
		Lori Buokler						
	•	(Name of Person)						
		pital Management, LLC						
		(Firin/Company)						
	, 730	NW 107th Avenue (Address)						
		•						
		emi, Plorida 33172 //State and Zip Code)						
For further information	on concerning this matter, please	call:						
Lori Buckler	me of Person)	at (305) 229-6688 (Area Code & Daytime T	alanhous Number)					
Enclosed is a check	for the following amount: e \$\sum \\$130,00 \text{ Filing Fee & Certificate of Status}	区 \$155.00 Piling Fee & Certified Copy	\$160,00 Filing Fee, Certificate of Status &					
·	Mailing Address Registration Section Division of Corporations P.O. Box 6327	(additional copy is enclosed) Street/Courler Address Registration Section Division of Corporatio Clifton Building	-					
	Tallahassee, FL 32314	2661 Executive Center Taliahassee, FL 32301	Circle					

(1.062 - 9/09/05 CT System Online

ARTICLES OF ORGANIZATION

Oil

RREF ST-FL, LLC; (a Florida limited libility company)

- The name of the limited liability company is: RREF ST-FL, LLC
- 2. The mailing and street address of the principal office of the limited liability company are:

730 NW 107 Avenue Suite 400 Miami, FL 3172

3. The name and the Florida street address of the Registered Agent and Registered 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 RREF ST-FL, LLC, a Delaware limited liability company.

Dated as of March 14, 2013.

SOLE MEMBER:

RREF ST-FL, LLC a Delaware limited liability company,

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

Lori Buckler, Authorized Signatory

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KT CORPORATION

04/01/5013 11:25 8626336092

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.

RREF ST-FL, LLC The name and the Riorida 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)		Kref st-1	FL, LLC			PSE IS
C T Corporation System (Name) 1200 South Pine Island Road			<u>, , , , , , , , , , , , , , , , , , , </u>			
(Name) 1200 South Pine Island Road	The name	and the Florida street address of the reg	istered agent an	ad office are: -		E P
(Name) 1200 South Pine Island Road		<i>y</i>		-		ب ريتي
(Name) 1200 South Pine Island Road		C T Corporation	uı Systom			HO P
		(Name)			·
			. ,		1 · · · · · · · · · · · · · · · · · · ·	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	•	1200 South Pine	Island Road			골닭
	• .	Florida Street Address (P.O. E	OX NOT ACCEPTA	ABLB)	-,	7
	. ,					. •
Plantation, Florida 33324					_	
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.

By: Wady (Signature)

Madonna Cuddiny Special Assistant Secretary

\$ 100.00. Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Cartificate of Status (optional)

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