# 101000008°

ACCOUNT	NO.	:	072100000032

REFERENCE :

468791

4322404

COST LIMIT : \$ 130.00

ORDER DATE: September 12, 2001

ORDER TIME : 9:52 AM

ORDER NO. : 468791-070

CUSTOMER NO:

4322404

CUSTOMER: Ms. Rhonda Braucht

Jenkens & Gilchrist

Suite 3200

1445 Ross Avenue

Dallas, TX 75202-2711

#### FOREIGN FILINGS

NAME:

FELCOR/MS CMBS LEASING GP,

L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_CERTIFIED COPY \_ PLAIN STAMPED COPY \_\_\_ CERTIFICATE OF GOOD STANDING

300004593383--2

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER:

### 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:

1 PPICOD/ME CMBC LEBOTAC CD	
1. FELCOR/MS CMBS LEASING GP, L.L.C. (Name of foreign	gn limited liability company)
	,— manua manua ya da manua ya manua ya manua
<ol> <li>DELAWARE         (Jurisdiction under the lew of which foreign limited liability     </li> </ol>	3
company is organized)	(FEI number, if applicable)
4. SEPTEMBER 4, 2001	5. PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpenal")
	exter or perpendit.)
6. upon qualification	
(Date hist transacted business in Florida, (S	See sections 608.501, 608.502, and 817.155, F.S.)
7. 545 E. JOHN CARPENTER FREEWAY, SUITE 130	
	=
IRVING, TEXAS 75062	<del></del>
(Street addre	ss of principal office)
G TC1' '. 141 4 141	· - ·
8. If limited liability company is a manager-manage	ed company, check here 💌
0.71	
9. The name and usual business addresses of the ma	maging members or managers are as follows:
SEE ATTACHMENT "A"	
Par Strategy M. M.	
	FAR O1
	7 7 T
10. Attached is an original certificate of existence norman than o	
the jurisdiction under the law of which it is one wired (A she	O days old, duly authenticated by the official having custody of records in otocopy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under eath of the translator must	orcopy is not acceptable. If the certificate is in a foreign language, a
	C Sublinius (.)
11. Nature of business or purposes to be conducted of	or momented in Election
TOTOLOGICAL TO SO CONCRETE TO	or bromoter in Atorias:
TO ACT AS GENERAL PARTNER OF FELCOR/MS CMBS	LEASING 1. P
-2-2	The state of the s
- Nel Som	
	uthorized representative of a member.
(ID accordance with section $608.408(3)$ .)	E.S., the execution of this document considered
an amumation under the penalties of per	July that the facts stated herein are true.)

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 Comp	pany is:			
FELCOR/MS C	MBS LEASING GP, L.L.C.				
2. The name and	i the Florida street address	of the registered	agent and office are:		
	Corpora	cion Service Co	`````````````````````````````````````		
•		(Name)			
_	, , , , , 1:	201 Hays Street			
		tess (P.O. Box <u>NO</u>		<del></del> .	
				AZ A	<b>્</b>
	Tallahassee	FI.	32301		
-	(0	City/State/Zip)	, ,38301		<del>5</del> 7
				SSA -	
Umina home som			_	FF, 0	, ,
liability company	ed as registered agent and at the place designated in t	to accept service	of process for the abov	e stat <u>ed</u> Jimitë	Z C
registered agent o	and agree to act in this capa	nis ceriijicate, 1 n icitu. I firther ac	tereby accept the appoint	ntment as	
AMERICAN LEGICALITY E	o www.urober una complete t	フミンサヘングリング ヘチャック	TI HILL MAN T Ame for and	7 7 7	2// 
accept the obligat	tons of my position as regis	tered agent as pr	ovided for in Chapter (	108. F.S.	_
1/				, , , , , , , , , , , , , , , , , , , ,	
11/1					
7	(Signature)			-	-
/ DDY COT	,				
BRIAN COL	JRTNEY, ASST. V.P.				
	\$ 100.00	Filing Fee for	Application		
	\$ 25.00 \$ 30.00	Designation of	Registered Agent		
	\$ 5.00	Certified Copy	y (optional)		
	₩ D.OO	ceruments of 2	Status (optional)		

#### ATTACHMENT "A"

MANAGERS:

THOMAS J. CORCORAN, JR.

545 E. JOHN CARPENTER FREEWAY, STE 1300

IRVING, TEXAS 75062

LAWRENCE D. ROBINSON

545 E. JOHN CARPENTER FREEWAY, STE 1300

IRVING, TEXAS 75062

JOHN E. LESLIE

545 E. JOHN CARPENTER FREEWAY, STE 1300

IRVING, TEXAS 75062

O1 SEP 17 AM II: I

## State of Delaware Office of the Secretary of State

PAGE :

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FELCOR/MS CMBS LEASING GP, L.L.C."

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 TWELFTH DAY OF SEPTEMBER, A.D. 2001.

O1 SEP 17 AM II: 1G
SECRETARY OF STATE
TALL AHASSEE EL OBIAN



Darriet Smith Windson Harriet Smith Windson, Secretary of State

3432641 8300

010451219

AUTHENTICATION: 1338559

DATE: 09-12-01