M01000002841

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
04 MAY -6 PM 5:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M01000002841

1. Limited Liability Company's Name
RFC MPR, LLC

9/26/03

2. Principal Office Address	3. Mailing Office Address
445 Broad Hollow Road	Attn.: Michelle Moezzi 445 Broad Hollow Road
Suite, Apt. #, etc. Suite 239	Suite, Apt. #, etc. Suite 239
City & State Melville, NY 11747	City & State Melville, NY
Zip / Country 11747 / Suffolk	Zip / Country 11747 / Suffolk

4. State/Country of Formation
Delaware

5. Date Organized or Qualified To Do Business in Florida
12/19/01

6. FEI Number
11-3641044
☐ Applied For
☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
LexisNexis Document Solutions Inc.

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, Etc.

City: Tallahassee | State: FL | Zip Code: 32301

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent _____ Date 5/4/04

JANET M. FOWLER REGISTERED AGENT MUST SIGN Assistant Secretary

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Managing Member	RFC Funding Corp.	445 Broad Hollow Road, Suite 239	Melville, NY 11747
	REINSTATEMENT 2003-2004		800035726438

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager _____ Date 5/4/04 Daytime Phone # 212.302.5151

Typed or printed name of signing Managing Member/Manager Michelle Moezzi, Vice President of RFC Funding Corp.

CORPORATION SERVICE COMPANY

M01000002841

ACCOUNT NO. : 072100000032

REFERENCE : 615083 7174534

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 200.00

ORDER DATE : May 4, 2004

ORDER TIME : 1:08 PM

ORDER NO. : 615083-005

CUSTOMER NO: 7174534

CUSTOMER: Ms Michelle Moezzi
Global Securitization Services
Suite 1715
114 West 47th Street
New York, NY 10036

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

NAME: RFC MPR, LLC

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan

EXAMINER'S INITIALS _____