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Tallahassee, FL 32301	VECEIVED		
Tel. 850 222 1092	279	-	

Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

#### 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	ORIX Global Finance LLC
	(Name of foreign limited liability company)
2.	Delaware 3. 13-3095268
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	04/03/2002 5. Perpetual Company will cease to
	(Date of Organization) (Duration: Year timined traditity company with cease to exist or "perpetual")
6.	Upon Qual.
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7.	1177 Avenue of the Americas, 10th Floor, New York, NY 10036-2714
	TATE ORID
	(Street address of principal office)
8.	If limited liability company is a manager-managed company, check here x
9.	The usual business addresses of the managing members or managers are as follows:
	John H. Moss, 1177 Avenue of the Americas, 10th Floor, New York, NY 10036-2714
	D.E. Mundell, 1177 Avenue of the Americas, 10th Floor, New York, NY 10036-2714
	Kazunori Okimoto, 1177 Avenue of the Americas, 10th Floor, New York, NY 10036-2714
	Hiroyuki Sakai, 1177 Avenue of the Americas, 10th Floor, New York, NY 10036-2714
	SEE ATTACHMENT
10	). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
tra	inslation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida:
	finance
	Signature of a member or an authorized representative of a member.

Hiroyuki Sakai, Deputy President - ORIX USA Corporation

Typed or printed name of signee

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Page I of 1

By For
Attacilinieni 10 Fiorida
d Liability Company for Author
Member / Manager Information

-i %	Full Name: Member/Manager: Business Address: City: State: ZIP Code: Full Name: Member/Manager:	Takeshi Sato Manager 1177 Avenue of the Americas, 10th Floor New York NY 10036-2714 Yoshihiko Miyauchi
	Business Address: City: State: ZIP Code:	3-22-8 Shiba, Minato-ku Tokyo JP 10586
င်း	Full Name: Member/Manager: Business Address: City: State:	Yoshiaki Ishida Manager 3-22-8 Shiba, Minato-ku Tokyo JP

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### 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:

ORIX	Global	Finance	TT	1

2. The name and the Florida street address of the registered agent and office are:

CT Corpors	ation System_	<b>≥</b> 2
	(Name)	TER E
c/o C T Con	poration System, 1200 South Pine Island Road	ENSEMBLE STATE
	Florida street address (P.O. Box NOT ACCEPTABLE)	D PSTA
Plantation	FL 33324	S2
	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, F.S..

C T Corporation System

Signatur

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORIX GLOBAL FINANCE LLC" 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 TWENTIETH DAY OF MAY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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SECOND STATE
SECOND ASSESS OF STATE



Warriet Smith Windson Secretary of State

3510029 8300

AUTHENTICATION: 1786111

020320987

DATE: 05-20-02