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ACCOUNT NO. : 072100000032

REFERENCE : 285073

4301938

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: October 17, 2003

ORDER TIME : 3:23 PM

ORDER NO. : 285073-105

CUSTOMER NO: 4301938

CUSTOMER: Ms. Karin Braverman

Clifford Chance Us Llp

54th Floor

200 Park Avenue

New York, NY 10166-0153

FOREIGN FILINGS

NAME: GALILEO CMBS T1 IG LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 1149

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:

_	. Galileo CMBS T1 IG LLC	``,		
•	(Name of foreign firmited liability company)		
<u>:</u> .	. Delaware (Judediction under the law of which foreign limited liability company is organized)	lable_ (PEI number, if applicable)		
١.	Date of Organization) 5. Perpetual (Duration: Yes	s limited liability company will acase to exist or		
ś.	October 24, 2003 (Date first transacted business in Florida. (See sections 608,501, 60	8.502, and 817.155, F-S.))		
<i>t</i> ,	7. c/o Clifford Chance US LLP, 200 Park Avenue, New York, New	York 10166		
	(Street address of principal colice)			
ξ,	3. If limited liability company is a manager-managed company, chee	k here 🗹		
).	The name and usual business addresses of the managing members or managers are as follows:			
	Brett Bradley c/o Clifford Chance US LLP, 200 Park Avenue, New	v York, NY 10166		
	,			
10.	10. Attached is an original certificate of existence, no more than 90 official having custody of records in the jurisdiction under the photocopy is not acceptable. If the certificate is in a foreign lang under oath of the translator must be submitted.)	law of which it is organized. (A		
3.	. Nature of business or purposes to be conducted or promoted in Florida: To engage in any lawfu activity for which a limited liability company may be organized.			

	Kut P. Was			
	Signature of a member or an authorized representation of this documents of the secondaries with section 608.408(3), P.S., the execution of this document of the secondaries of perjury that the facts stated herein are	nent constitutes an		
	Galileo Member TI IG LLC			
	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 Company is:
G	ilileo CMBS TI IG LLC
2.	The name and the Florida street address of the registered agent and office are:
	Corporation Service Company
	(Name)
	1201 Havs Street
	Florida atrost address (F.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301
	(City/State/Zip)
lia ag rei	wing been named as registered agent and to accept service of process for the above stated limited shillty company at the place designated in this certificate. I hereby accept the appointment as registered and agree to act in this capacity. I further agree to comply with the provisions of all statutes lating to the proper and complete performance of my duties, and I am familiar with and accept the ligations of my position as registered agent as provided for in Chapter 608, F.S. Signature)
	\$ 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 "GALILEO CMBS TI IG 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 SEVENTEENTH DAY OF OCTOBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GALILEO CMBS T1 IG LLC" WAS FORMED ON THE FOURTEENTH DAY OF OCTOBER, A.D. 2003.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

Daniet Smith Windson Secretary of Szarce

AUTHENTICATION: 2697210

3714943 8300

030669955

DATE: 10-17-03