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ACCOUNT NO. : 072100000032

REFERENCE : 285073

AUTHORIZATION

COST LIMIT

ORDER DATE: October 17, 2003

ORDER TIME : 3:24 PM

ORDER NO. : 285073-125

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 HL LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

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 OF THE STATE OF FLORIDA:

١.	Galileo CMBS T1 HL LLC					
	(Name of foreign II	miled	liability company)			
2.	Delaware (Jurisdiction under the law of which foreign limited liability company is organized)	3.	Not yet available. (FEI number, if applicable)			
4.	October 14, 2003 (Date of Organization)	5.	Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")			
6.	October 24, 2003 (Date first transmeted business in Florida. (S	ec so	silons 608.501, 608.502, and 817.155, F.S.))			
7.	c/o Clifford Chance US LLP, 200 Park Avenue, New York, New York 10166					
	(Street address	s of to	incipal office)			
_	•	•				
8.	If limited liability company is a manager-managed company, check here					
9.	The name and usual business addresses of the managing members or managers are as follows:					
	Brett Bradley c/o Clifford Chance US LI.P. 200 Park Avenue, New York, NY 10166					
10.	Attached is an original certificate of existence, official having custody of records in the jurise photocopy is not acceptable. If the certificate is under oath of the translator must be submitted.)	dicti	nore than 90 days old, duly authenticated by the on under the law of which it is organized. (A foreign language, a translation of the certificate			
11.	Nature of business or purposes to be conducted activity for which a limited liability company ma					
	Signature of a member or an author (In accordance with section 602,408(3), F.S., plantimation under the penaltice of parjury that the Galilco Member T1 HL LLC Typed or printed	c fact	ution of this document constitutes an			

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.

ı.	The name of the Limited Liability Company is:						
<u>Ga</u>	lileo CMBS T1 HL LLC						
2.	2. The name and the Florida street address of the registered agent and office are:						
	Corporation Service Company (Name)						
	1201 Hays Street						
	Florida street address (P.O. Dox NOT ACCEPTABLE)						
	Tallahassoc FL 32301 (CityStateZip)						
lia. agi rel	tiving been named as registered agent and to accept service of process for the above stated limited bility company at the place designated in this certificate, I hereby accept the appointment as registered ent and agree to act in this capacity. I further agree to comply with the provisions of all statute along 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 T1 HL 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 HL 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.



Warriet Smith Windson Secretary of State

AUTHENTICATION: 2697226

DATE: 10-17-03

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