

MU4000002412

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

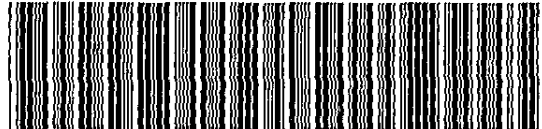
(Business Entity Name)

(Document Number)

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04 JUN 21 PM 2:07

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

*BT*

RECEIVED  
04 JUN 21 AM 10:55  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 762146 5157078
AUTHORIZATION :
COST LIMIT : \$ 125.00

FILED
04 JUN 21 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : June 18, 2004

ORDER TIME : 9:54 AM

ORDER NO. : 762146-005

CUSTOMER NO: 5157078

CUSTOMER: Ms. Heather Leigh
Urban Investments Advisors Llc
Suite 800
1320 19th Street, N.w.
Washington, DC 20036

FOREIGN FILINGS

NAME: CGABLES 1, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
04 JUN 11 PM 07  
FILED

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:

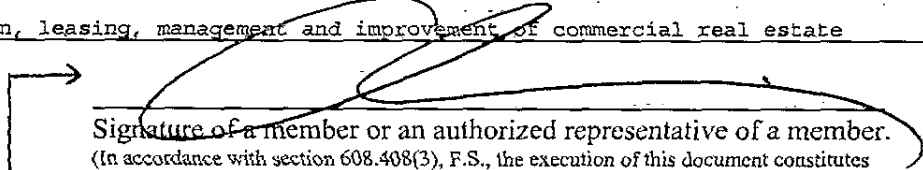
- 1. CGables 1, LLC  
(Name of foreign limited liability company)
- 2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)
- 3. applied for  
(FEI number, if applicable)
- 4. June 16, 2004  
(Date of Organization)
- 5. perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
- 6. Upon filing  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
- 7. c/o Urban Investments Advisors, 1320 19th Street, NW, Suite 800  
Washington, DC 20036 Attn: Constance Collins Davis  
(Street address of principal 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:

Urban Investments II, LLC  
c/o Urban Investments Advisors, LLC  
1320 19th Street, NW, Suite 800, Washington, DC 20036  
Attn: Constance Collins Davis

- 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

- 11. Nature of business or purposes to be conducted or promoted in Florida: Acquisition, leasing, management and improvement of commercial real estate

  
Signature of a member or an authorized representative of a member.  
(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.)  
Constance Collins Davis, Authorized Signatory  
Typed or printed name of signee

CGables 1, LLC by its sole member, Urban Investments II, LLC, by its managing member, Urban Investments Advisors, LLC, by its managing member, Wellspring Investments Management I, LLC

**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:

CGables 1, LLC

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. Box **NOT** ACCEPTABLE)

Tallahassee

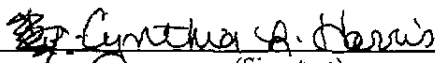
FL

32301

(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.*

**Cynthia L. Harris**  
as its agent

  
(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

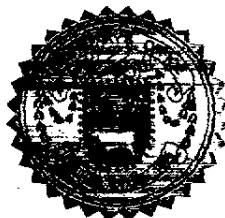
PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CGABLES 1, 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 EIGHTEENTH DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CGABLES 1, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JUNE, A.D. 2004.

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



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3816803 8300

AUTHENTICATION: 3179631

040450639

DATE: 06-18-04