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| (Requestor's Name) | ŀ |
|---|---|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
| | |
| Office Use Only | |



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TALLAHASSEE, FLORID



ACCOUNT NO. : 072100000032

REFERENCE :

4301683

AUTHORIZATION C

COST LIMIT

ORDER DATE: November 15, 2007

ORDER TIME : 5:13 PM

ORDER NO. : 321179-005

CUSTOMER NO: 4301683

FOREIGN FILINGS

NAME: TGM SERVCO MFF RVII LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kelly Courtney -- EXT# 2916

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:

| ENTERED |
|--|
| 1, TGM SERVCO MFF RVII LLC |
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L L C," or "LLC.") |
| |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the we consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LLC.") |
| 2 NEW YORK |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) |
| 4. NOVEMBER 15, 2007 5. Perpetual |
| (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. upon filing |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608 502 F.S. to determine penalty liability) |
| 7. c/o TGM Associates L.P., 650 Fifth Avenue, 28th FL, New York, NY 10019 |
| c/o TGM Associates L.P., 650 Fifth Avenue, 28th FL, New York, NY 10019 |
| (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: |
| TGM MANAGEMENT LLC |
| 650 Fifth Avenue, 28TH FLOOR |
| New York, NY 10019 |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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 outh of the translator must be submitted.) |
| 11. Nature of business or purposes to be conducted or promoted in Florida: to engage in the |
| real estate management business |
| 5 Culu Cly |
| 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) |
| by: Thomas Gochberg, President |

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.

| The name of the Limited Liability Company is: |
|--|
| TGM SERVCO MFF RVII LLC |
| If name unavailable, the alternate name to be used in the state of Florida is: |
| 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} |
| 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, Florida Statutes. |
| William M. Edrington, Authorized Representative, Corporation Service Compan |
| \$ 100.00 Filing Fee for Application |
| \$ 25.00 Designation of Registered Agent |

\$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

State of New York Department of State } ss:

I hereby certify, that TGM SERVCO MFF RVII LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 11/15/2007, and that the Limited Liability Company is existing so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 15th day of November two thousand and seven.

Daniel Shapiro

Special Deputy Secretary of State

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