M0700	0007120
(Requestor's Name) (Address) (Address)	300108437683
(City/State/Zip/Phone #)	OT DEC -7 PH 3: 10 SECRETARY OF STATE
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Office Use Only	M 1217



CORPORATION SERVICE COMPANY

	ACCOUNT NO.	:	07210000032
	REFERENCE	:	349438 7448999
	AUTHORIZATION	:	Spullena 2 - Fi
	COST LIMIT	:	
ORDER DATE :	December 6, 2007		FLORID
ORDER TIME :	9:06 AM		7
ORDER NO. :	349438-020		
CUSTOMER NO:	7448999		

FOREIGN FILINGS

.

NAME: RENAISSANCE FINANCE IX, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

· .	CERTIFIED COPY
XX	PLAIN STAMPED COPY
	CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Chapman -- EXT# 2908

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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

Renaissance Finance IX, 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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "L.L.C.")

2	Delaware 3.	26-0675859					
-	(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number. if applicable)					
4	August 6, 2007 5.	Perpetual					
	(Date of Organization)	(Duration: Year limited liability company will crise to exist or "perpetual")					
6		SEX P III					
	(Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608 502 F S to determine penalty liability)						
7	101 E. Kennedy Blvd, Suite 2100	ORA 10					
	Tampa, FL 33602-5148	Dri P					
	(Street Address of Principal Office)						
8	If limited liability company is a manager-managed c	ompany, check here 🗌					

9 The name and usual business addresses of the managing members or managers are as follows.

Renaissance Finance CDE, LLC

101 E. Kennedy Blvd, Suite 2100

Tampa, FL 33602-5148

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.)

II Nature of business or purposes to be conducted or promoted in Florida: New Markets Tax Credit-

qualified investments and/or activities and all activities incidental thereto

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) David P. Leve

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:

Renaissance Finance IX, 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 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, Florida Statutes.

Corporation Service Company BY: Meather Chapman (Signature) Heather Chapman as its agent

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RENAISSANCE FINANCE IX, 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 SIXTH DAY OF DECEMBER, A.D. 2007.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RENAISSANCE FINANCE IX, LLC" WAS FORMED ON THE SIXTH DAY OF AUGUST, A.D. 2007.

4402486 8300

071293783 You may varify this certificate online at corp.delaware.gov/authver.shtml

Varnet Smile Hen

Harriet Smith Windsor, Secretary of State AUTHENTICATION: 6216846

DATE: 12-06-07