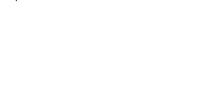
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(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone	: #)
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PICK-UP	WAIT	MAIL .
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer:	
Special instructions to	rilling Officer.	

Office Use Only





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307-5A032

COVER LETTER

TO: Registration Section

Division of Corporations .		
SUBJECT: Madison International LLC		
· · · · · · · · · · · · · · · · · · ·	red Liability Company)	
	pility Company for Authorization to Transact Business in smitted to register the above referenced foreign limited	
Please return all correspondence concerning this ma	atter to the following:	
Glenn R. Caddy		
(Nan	ne of Person)	
Madison International LLC		
(Firm	n/Company)	
3101 North Federal Highwa	y, Suite 301	
(Address)	
Fort Lauderdale, Florida 33		
(City/Sta	te and Zip Code)	
For further information concerning this matter, plea	se call:	
Glenn R. Caddy	at (954) 568-0015	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sumsymbol{\sum}\$	\$155.00 Filing Fee & \$\infty\$\$\$\$ \$\infty\$\$\$\$\$ \$160.00 Filing Fee, Certificate \$	



November 27, 2007

GLENN R CADDY 3101 N FEDERAL HWY STE 301 FT LAUDERDALE, FL 33306

SUBJECT: MADISON INTERNATIONAL LLC

Ref. Number: W07000057732

We have received your document for MADISON INTERNATIONAL LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L06000023512 (MADISON INTERNATIONAL, LLC).

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Letter Number: 907A00067380

Tammy Hampton Regulatory Specialist II

Registration/Qualification Section

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing	
Members of Madison International LLC (Name of Limited Liability Company)	,
(Name of Limited Liability Company)	
a limited liability company duly organized and existing under the laws of	
Delaware	
(State or Country of Organization)	
Because the name of this foreign limited liability company does not satisfy the	
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the	
following name to transact business in the state of Florida:	
Madison International Partners LLC	
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)	
Date:	
Signar (re(s) of Manager(s) and/or Managing Member(s):	
Glenn R. Caddy	
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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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. Madison International LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC	J.")
Madison International Partners LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Limit Company," "L.L.C.," "LLC.")	
_{2.} Delaware 3. N/A	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. November 15, 2007 (Date of Organization) [Ourtion: Year limited liability company will cease to exist or "perpetual")	
6. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 3101 North Federal Highway, Suite 301	
Fort Lauderdale, Florida 33306	r 80
(Street Address of Principal Office)	JAN SION (
8. If limited liability company is a manager-managed company, check here 🗸	TARY OF COL
9. The name and usual business addresses of the managing members or managers are as follows:	SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION ON 15 OF CORPORATION OF STATE OF ST
Glenn R. Caddy, Managing Member	: 15 VIONS
3101 North Federal Highway, Suite 301	
Fort Lauderdale, Florida 33306	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang translation of the certificate under eath of the translator must be submitted.)	uage, a
11. Nature of business or purposes to be conducted or promoted in Florida: Real estate finance sourcing	development
management and investment services related to the hospitality industry and to hotel assets and the sales and marketing of thes	assets .

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:		
Madison International LLC		
If name unavailable, the alternate name to be used in the state of Florida is:		
Madison International Partners LLC		.
2. The name and the Florida street address of the registered agent and office are:		
Glenn R. Caddy		
(Name)		
3101 North Federal Highway, Suite 301		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Fort Lauderdale FL		
City/State/Zip		
Having been named as registered agent and to accept service of process for the above stat liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida State (Signature)	nt as registe I statutes accept the	red DIVISI

Filing Fee for Application

Certified Copy (optional) Certificate of Status (optional)

Designation of Registered Agent

\$ 190.00

\$ 25.00

\$ 30.00

5.00

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MADISON INTERNATIONAL 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2007.

AND STATE OF THE PARTY OF THE P

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6165931

DATE: 11-16-07

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