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Email Address: patrick.gardner@archongroup.com

FLORIDA/FOREIGN LIMITED LIABILITY CO.
LCP SLJV 2009-1 FL-2, L.L.C.

Certificate of Status	0
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Page Count	05
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T. CLINE
JAN - 7 2010
EXAMINER

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. LCP SLJV 2009-1 FL-2, L.L.C.
(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.," "LLC.")

2. Delaware 3. Applied for
(Jurisdiction under the law of which foreign limited liability (FBI number, if applicable)
company is organized)

4. 12/30/2009 5. Perpetual
(Date of Organization) (Duration: 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. c/o Strategic Loan Joint Venture 2008-1, LLC, c/o LandCap Partners
399 Park Avenue, 18th Floor, New York, NY 10022
(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:

Manager: LCP Strategic Loan Joint Venture 2008-1, LLC

Address1: c/o LandCap Partners, c/o NorthStar Realty Finance Corp, 399 Park Avenue, 18th Fl, New York, NY 10022

Address2: c/o LandCap Partners, c/o Goldman Sachs & Co, 85 Broad Street, New York, NY 10004

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: _____

See Addendum attached hereto and incorporated herein

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.)

ADAM J. BROOKS, as Class A Member Representative

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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Nature of Business or purposes to be conducted or promoted in Florida:

To foreclose on first lien mortgages, accept payment at foreclosure sales and hold real estate for future sales; to improve, manage, sell, assign, encumber, transfer or otherwise dispose of such real estate; and to engage in any business, purpose or activity that may be lawfully engaged in by limited liability companies under the laws of Florida and Delaware.

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**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:

LCP SLIV 2009-1 FL-2, L.L.C.

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

1200 South Pines Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

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.

C T Corporation System

By: Madonna Cuddihy

(Signature)

Madonna Cuddihy

Special Assistant Secretary

\$ 100.00

\$ 25.00

\$ 30.00

\$ 5.00

Filing Fee for Application

Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

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TALLAHASSEE, FLORIDA

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LCP SLJV 2009-1 FL-2, L.L.C." 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 FOURTH DAY OF JANUARY, A.D. 2010.

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

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TALLAHASSEE, FLORIDA


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Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7734454

DATE: 01-04-10