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DEPARTMENT OF STATE CORPORATION

B. KOHR

AUG 2 5 2010

EXAMINER

SLOWCIARY OF STATE
WAY STONE OF CORPORATIONS



ACCOUNT NO. : I2000000195

REFERENCE: 482598 4303194

AUTHORIZATION

COST LIMIT

ORDER DATE: August 18, 2010

ORDER TIME : 1:04 PM

ORDER NO. : 482598-020

CUSTOMER NO: 4303194

FOREIGN FILINGS

NAME: AMT CADC VENTURE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

___ PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER:

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

AmT CADC Venture, LLC			
(Name of Foreign Limited Liability Company; must incl	lude "Limited Liability Con	npany," "L.L.C.," or "LLC.")	-
			•
name unavailable, enter alternate name adopted for the purp			
nsent of the managers or managing members adopting the altompany," "L.L.C.," "LLC.")	emate name. The attemate	name must include "Limited Liabi	iity
Delaware	3. 27-3055615		
(Jurisdiction under the law of which foreign limited liability company is organized)		nber, if applicable)	-
07/16/2010	5. Perpetual		
(Date of Organization)	(Duration: Year limit exist or "perpetual")	ed liability company will cease to	•
Upon filing			
(Date first transacted business in F (See sections 608.501 & 608.502 F.S	lorida, if prior to registratio S. to determine penalty liab	n.) lity)	10 Mg 25 by 3 12
333 S. Grand Avenue, 28th Floor, Los Ang	geles, CA 90071		
			16 25 PH 3
(Street Address	s of Principal Office)		ַט
•	•	1571	至
If limited liability company is a manager-managed	d company, check here		Ç
The name and usual business addresses of the man	naging members or ma	nagers are as follows:	1
PMO Loan Acquisition Venture, LLC			
333 S. Grand Avenue, 28th Floor			-
			-
Los Angeles, CA 90071			-
Available and the second of the second			
. Attached is an original certificate of existence, no more than 90 jurisdiction under the law of which it is organized. (A photocop			in sprox
nslation of the certificate under oath of the translator must be sub			
. Nature of business or purposes to be conducted of	or promoted in Florida:	Real Estate	
. Nature of business of purposes to be conducted t	n promoted in Florida.		•
			<u>.</u> ,
Signature of a member or an au		C 1	

See attached signature page

Typed or printed name of signee

Supplemental Signature Page

Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

AmT CADC Venture, LLC

Signature of a member of 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.)

AMT CADC VENTURE, LLC, a Delaware limited liability company

By: PMO Loan Acquisition Venture, LLC, a Delaware limited liability company, its Manager

> By: PMO Investor, L.P.,

a Delaware limited partnership,

its Managing Member

Name: Ambrose Histor

Title: Authorized Signatory

Namo: Emily

Alexander

Title: Authorized Signatory

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:	
AmT CADC Venture, 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 li liability company at the place designated in this certificate, I hereby accept the appointment as agent and agree to act in this capacity. I further agree to comply with the provisions of all state relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes Corporation Service Company Troy Todd as its agent	registerea utes pt the

\$ 100.00 Filing Fee for Application

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

\$ 25.00

\$ 30.00

\$ 5.00

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AMT CADC VENTURE, 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 TWENTY-FIFTH DAY OF AUGUST, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMT CADC VENTURE, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JULY, A.D. 2010.

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

4844633 8300

100855286

AUTHENTY CATION: 8191190

DATE: 08-25-10

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