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EXAMINER



ON RENAICE COMPANY.				
ACCOUNT NO.	:	120000000		ت الاستان ال
REFERENCE	:	515463	4320946	65 TO TO TO
AUTHORIZATION	:		~ (
COST LIMIT	:	\$ 125.00	Spelle	lenda
ORDER DATE : September 21, 20	10			,
ORDER TIME : 11:49 AM				
ORDER NO. : 515463-005				
CUSTOMER NO: 4320946				
FOREIGN F: NAME: 1303 OCALA ROA			LLC	
XXXX QUALIFICATION (TYPE: LI	្ជ)			
PLEASE RETURN THE FOLLOWING AS	PR	OOF OF FILE	ING:	
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	AND:	ING		
CONTACT PERSON: Jeanine Reynol	lds	EXT# 29	933	

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	
1. 1303 Ocala Road Holdings, LLC (Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")	ate name. The alternate name must include "Limited Liability
2. Maryland 3.	36-4403206
(Jurisdiction under the law of which foreign limited liability company is organized)	36-4403206 (FEI number, if applicable)
4. 9/20/2010 5.	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. 9/20/2010	Store
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. to	(Duration: Year limited liability company will cease to exist or "perpetual") Ida, if prior to registration.) o determine penalty liability)
7. c/o CWCapital, 701 13th St., NW, Ste 1000	<u> </u>
Washington, DC 20005	্র জ
(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 manag	ging members or managers are as follows:
See Attachment	
· · · · · · · · · · · · · · · · · · ·	
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy it translation of the certificate under eath of the translator must be submit	is not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	promoted in Florida: Rental and management
of commercial property.	
(In accordance with section 608.408(3), F.S. an affirmation under the penalties of perjury Sheena Thomas, Authorized	y that the facts stated herein are true.) I Representative
Typed or printed n	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 Con	mpany is:	
1303 Ocala Road Holdings, LLC		
If name unavailable, the alternate name to	be used in the state of Florida is:	
2. The name and the Florida street address	ss of the registered agent and office are:	
Corporation Service Company		
	(Name)	
1201 Hays Street		
Florida Street A	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:

Jeanine Reynolds

(Signature)

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)

ATTACHMENT

FLORIDA APPLICATION FOR REGISTRATION OF A FOREIGN LIMITED LIABILITY COMPANY

1303 OCALA ROAD HOLDINGS, LLC

Item 9.

Sole Member/Manager's Name

Wells Fargo Bank, N.A., as Trustee for the registered holders of Deutsche Mortgage & Asset Receiving Corporation, COMM 2000-C1 Commercial Mortgage Pass-Through Certificates

Member/Manager's Address c/o CWCapital Asset Management LLC 701 13th Street, NW Suite 1000 Washington, D.C. 20005

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT 1303 OCALA ROAD HOLDINGS, LLC, REGISTERED SEPTEMBER 20, 2010, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS SEPTEMBER 21, 2010.

Paul B. Anderson Charter Division

Paul B. Underen



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097