# M110000000703

(Requestor	s Name)
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**EXAMINER** 



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CIVISION OF CORPORATIONS

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ACCOUNT NO. : I2000000195

REFERENCE

4320946

AUTHORIZATION.

COST LIMIT

\$ 125.00

ORDER DATE: February 11, 2011

ORDER TIME : 2:40 PM

ORDER NO. : 673137-015

CUSTOMER NO: 4320946

#### FOREIGN FILINGS

NAME:

12612 VICTORIA PLACE CIRCLE

HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

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:

1.	12612 Victoria Place Circle Holdings, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
СО	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
2.	Maryland 3.
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	1/26/2011 5 perpetual
•	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6	2/11/2011
Ο.	(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 CWCapital, 7501 Wisconsin Avenue, Suite 500 West
	Bethesda, MD 20814
	(Street Address of Principal Office)
8.	C/o CWCapital, 7501 Wisconsin Avenue, Suite 500 West  Bethesda, MD 20814  (Street Address of Principal Office)  If limited liability company is a manager-managed company, check here  The name and usual business addresses of the managing members or managers are as follows:
9.	The name and usual business addresses of the managing members or managers are as follows:
	SEE ATTACHMENT
th	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in equivalent time is a foreign language, a instance of the certificate and er oath of the translator must be submitted.)
	. Nature of business or purposes to be conducted or promoted in Florida: Rental and management of
1 2	$\cdot$
	commercial property.
	Speera homes
	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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
	Sheena Thomas, Authorized Representative

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	he Limited Liability Company is:
12612 Victoria P	Place Circle Holdings, LLC
If unavailable, the	e 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	Corporation Service Company
· .	(Name)
12	201 Hays Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301
<del></del>	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

Kimberty B. Moret

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

#### 12612 VICTORIA PLACE CIRCLE HOLDINGS, LLC

Item 9.

#### Sole Member/Manager's Name

U.S. Bank, N.A., successor to Wells Fargo Bank, N.A., as Trustee for the registered holders of CD 2007-CD4 Commercial Mortgage Trust, Commercial Mortgage Pass-Through Certificates, Series CD 2007-CD4

Member/Manager's Address c/o CWCapital Asset Management LLC 7501 Wisconsin Avenue, Suite 500 West Bethesda, MD 20814

## 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 12612 VICTORIA PLACE CIRCLE HOLDINGS, LLC, REGISTERED JANUARY 26, 2011, 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 FEBRUARY 11, 2011.

Paul B. Anderson Charter Division



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

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