M/200000/229

	(Requestor's Name)
	(Address)
	(Address)
. ((City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
	A. LUNT
	MAR - 6 2011
	EXAMINER



500222781595

RECEIVED

12 MAR -5 AM IO: 55

2012 MAR -5 AH MR 82

Office Use Only



CORPORATI

ION SERVICE COMPANY					
ACCOUNT NO. : 12000000195					
REFERENCE : 112126 4320946					
AUTHORIZATION SHEDDLENGEN					
COST LIMIT : \$.125.00					
ORDER DATE : February 29, 2012					
ORDER TIME : 9:49 AM	2(
ORDER NO. : 112126-040	ZOIZ HAR				
CUSTOMER NO: 4320946	300 5				
FOREIGN FILINGS	AN W 62				
NAME: 293 EAST ALTAMONTE DRIVE HOLDINGS, LLC					
XXXX QUALIFICATION (TYPE: LL)					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING					

EXAMINER:

CONTACT PERSON: Troy Todd -- EXT# 2940

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:

	JIII OF TECHNOL.
1. 293 East Altamonte Drive Holdings, LLC	
(Name of Foreign Limited Liability Company; must include	le "Limited Liability Company," "L.L.C.," or "LLC.")
•	•
(If name unavailable, enter alternate name adopted for the purpose	e of transacting business in Florida and attach a copy of the written
consent of the managers or managing members adopting the altern	nate name. The alternate name must include "Limited Liability
Company," "L.L.C," "LLC.")	
2 Maryland 3	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
. ,	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6, 2/28/2012	• • •
(Date first transacted business in Flor	ida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. t	to determine penalty hability)
7. c/o CWCapital, 7501 Wisconsin Avenue, Suite 500	West, Bethesda, MD 20814
	The Parks
(Street Address o	f Principal Office)
8. If limited liability company is a manager-managed of	company, check here 🛛
a. If finited hability company is a manager-managed c	Sompany, once k nere 🖂
9. The name and usual business addresses of the mana	ging members or managers are as follows: 💮 🧓
c/o CWCapital, 7501 Wisconsin Avenue, Suite 500) West, Bethesda, MD 20814
See Attachment	
- OCC // NOCONIVOR	
	ays old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy	
translation of the certificate under cath of the translator must be subm	med.)
11. Nature of business or purposes to be conducted or	promoted in Florida:
Rental and management of commercial property.	
Shenothenes	_
	horized representative of a member.
	tion of this document constitutes an affirmation under the
•	E. I am aware that any false information submitted in a
<u>•</u>	a third degree felony as provided for in s.817.155, F.S.)
Sheena Thomas, Authorized Pers	son 2/28/2012

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:	
293 East Al	tamonte Drive Holdings	, LLC		,
If unavailabl	e, the alternate to be use	ed in the sta	ate of Florida is:	2012 HAR
2. The name	and the Florida street a	ddress of the	he registered agent and office are:	STOP A
•	Corporation Service	Company		
			(Name)	Tan fire
	1201 Hays Street			
	Florida St	reet Address	(P.O. Box NOT ACCEPTABLE)	-
	Tallahassee		FL 32301	
			City/State/Zip	
liability comp agent and ag relating to th	oany at the place designa ree to act in this capacity e proper and complete pe	ted in this o I further erformance d agent as	scept service of process for the above si certificate, I hereby accept the appointm agree to comply with the provisions of of my duties, and I am familiar with an provided for in Chapter 608, Florida S Troy Todd as its agent	nent as registered all statutes ad accept the
		(Signature)	
			iling Fee for Application	
	\$	25.00 D	esignation of Registered Agent	

Certified Copy (optional) 5.00 Certificate of Status (optional)

\$ 30.00

ATTACHMENT

FLORIDA APPLICATION FOR REGISTRATION OF A FOREIGN LIMITED LIABILITY COMPANY

293 EAST ALTAMONTE DRIVE HOLDINGS, LLC

Item 9.

Sole Member/Manager's Name

U.S. Bank National Association, as Trustee, successor-in-interest to Bank of America, N.A., as Trustee, successor by merger to LaSalle Bank National Association, as Trustee, for the registered holders of J.P. Morgan Chase Commercial Mortgage Securities Corp., Mortgage Pass-Through Certificates, Series 2006-CIBC17

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

2012 MAR -5 M 题 02

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 293 EAST ALTAMONTE DRIVE HOLDINGS, LLC, REGISTERED FEBRUARY 23, 2012, 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 29, 2012.

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