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EXAMINER



ACCOUNT NO. : I2000000195 REFERENCE : 486173 4803460 AUTHORIZATION : (130.00 COST LIMIT ORDER DATE: January 4, 2013 ORDER TIME : 9:54 AM ORDER NO. : 486173-025 CUSTOMER NO: 4803460 FOREIGN FILINGS NAME: NATIONAL COMMUNITY CAPITAL FUND TAMPA #1 LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING CONTACT PERSON: Stephanie Milnes -- EXT# 52920

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 RUSINESS IN THE STATE OF FLORIDA:

Ш	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1.	National Community Capital Fund Tampa #1 LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written and of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability impany," "L.L.C." "LLC.")
2	Delaware 3.
i	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	October 5, 2012 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will.ocase or "perpetual")
6.	Upon Registration ARE
-	Upon Registration (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	108 Church Street, 3rd Floor, New Brunswick, New Jersey 08907
	LOS 3.
	(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: Community Loan Fund of New Jersey, Inc., 108 Church Street, 3rd Floor, New Brunswick, NJ 08907
tiv tra	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: business of owning mortgage loans Signature of a method or an authorized representative of a member.
	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. 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.)
	Wayne T. Meyer, 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	Limited Liability C	Company is:			
NATIONAL COM	IMUNITY CAPITA	L FUND TAMPA #1 LLC			
If unavailable, the	alternate to be used i	in the state of Florida is:			
2. The name and the	ne Florida street add	ress of the registered agent and office are:	SECRE SECRE	2013 JAH	71
Co	rporation Service Co		TARY OF	H-7 AM	m
120	1 Hays Street	(Name)	STATE FLORIDA	9: 55	D
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)			
<u>Ta</u>	llahassee	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: Stephanie Milres
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "NATIONAL COMMUNITY CAPITAL FUND

TAMPA #1 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 FOURTH DAY OF

JANUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL COMMUNITY CAPITAL FUND TAMPA #1 LLC" WAS FORMED ON THE FIFTH DAY OF OCTOBER, A.D. 2012.

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

5223653 8300

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Jeffrey W Bullock, Secretary of State
AUTHENTY CATION: 0120990

DATE: 01-04-13

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