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NAME:

CJUF III NT LLC

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: CJUF III NT LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Edward Schmitt
Name of Person
c/o Canyon Capital Realty Advisors LLC
Firm/Company
2000 Avenue of the Stars, 11th Floor
Address
Los Angeles, CA 90067
City/State and Zip Code
eschmitt@canyonpartners.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Edward Schmitt Name of Contact Person at (310) Area Code Daytine Telephone Number
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsiz\$ \$\siz\$ \$125.00 \text{ Filing Fee}\$ \$\Bigsiz\$ \$\siz\$ \$130.00 \text{ Filing Fee} & \Bigsiz\$ \$\Bigsiz\$ \$\Bigsiz\$ \$\Certificate\$ \$\Delta \text{Status}\$ \$\Delta \tex

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. CJUF III NT LLC			
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		 -	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must i Liability Company," "L.L.C," or "L.L.C,")	include "L	ted	
2. Delaware 3.			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			
4. 01/28/2014			
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 2000 Avenue of the Stars, 11th Floor			
Los Angeles, CA 90067	TĂ.		
(Street Address of Principal Office)	, c	— <i>∻</i> —	
6. 2000 Avenue of the Stars, 11th Floor	117		
Los Angeles, CA 90067			
(Mailing Address)	71:		,
7. The name, title or capacity and address of the person(s) who has/have authority to manage is	s/are:	္	م مروا
CJUF III Atlas Portfolio LLC, MEMBER	ë;;-;- 3>	57	
2000 Avenue of the Stars, 11th Floor			
Los Angeles, CA 90067			
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated having custody of records in the jurisdiction under the law of which it is organized. (A photocol acceptable. If the certificate is in a foreign language, a translation of the certificate under oath o must be submitted)	py is no	t	
Signature of an authorized person			
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the fa am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a false.			true, I
Jonathan P. Roth			
Typed or printed name of signee			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 Limite CJUF III NT LL	• • •	
	e to be used in the state of Florida is:	
2. The name and the Flori	da street address of the registered agent and office are:	
Natio	nal Corporate Research, Ltd, Inc.	_ >
مر د. د. م	(Name)	70-1
155 Office Plaza Drive		eraku Prana
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Tallahas	ssee _{FL} 32301	
	City/State/Zip	57 Sign

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 605, Florida Statutes.

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

> Richard Arthur, Asst. Secretary

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CJUF III NT 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 THIRTY-FIRST DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CJUF III NT LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2014.

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

TALLARIS SEE COSTE

5473076 8300

140115022

AUTHENTY CATION: 1100613

DATE: 01-31-14

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