M1400005565

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500262360135

RECEIVED
DEPARKENT OF STATE

SECRETARY OF STATE OF

AUG 0 5 2014 J. HARRIS



ACCOUNT NO. : I2000000195 REFERENCE : 203371 8003446 AUTHORIZATION : COST LIMIT ORDER DATE : July 2, 2014 ORDER TIME : 9:03 AM ORDER NO. : 203371-005 CUSTOMER NO: 8003446 FOREIGN FILINGS NAME: CENTER STREET LENDING FUND IV SPE, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY __ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Karissa Lowry -- EXT# 62277

EXAMINER: ____



ON SERVICE COMPANY					
ACCOUNT NO. : 12000000195					
REFERENCE : 203371 8003446					
AUTHORIZATION: Souls le man					
COST LIMIT : \$68.87.75					
ORDER DATE : July 2, 2014					
ORDER TIME : 9:03 AM					
ORDER NO. : 203371-005					
CUSTOMER NO: 8003446					
FOREIGN FILINGS					
NAME: CENTER STREET LENDING FUND IV SPE, LLC					
XXXX QUALIFICATION (TYPE: <u>LL</u>)					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING					
CONTACT PERSON: Karissa Lowry EXT# 62277					
EXAMINER:					

COVER LETTER

SUBJECT:	Center Street Lending Fund IV	V SPE, LLC
SOBJECT: _		Name of Limited Liability Company
The enclosed 'Existence, and	"Application by Foreign Limited I check are submitted to register t	d Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida
Please return a	all correspondence concerning the	nis matter to the following:
	Lynn Linchangeo	
		Name of Person
	Center Street Lending Corp	rp.
		Firm/Company
	18301 Von Karman Ave, St	ite 330
		Address
	Irvine, CA 92612	
		City/State and Zip Code
	llinch@centerstreetlending.c	.com
	E-mail addres	ess: (to be used for future annual report notification)
For further info	rmation concerning this matter, p	please call:
Lynn l	inchangco	,949 244-1090
	Name of Person	at (
Divisio Registr P.O. Bo	ING ADDRESS: on of Corporations ation Section ox 6327 ssee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a G	check for the following amo .00 Filing Fee \$130.00 Fil Certificate of	Count:



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 7, 2014

CSC KARISSA LOWRY

:SUBMI Please give original

SUBJECT: CENTER STREET LENDING FUND IV SPE, LLCubmission date as file date. Ref. Number: W14000041596

We have received your document for CENTER STREET LENDING FUND IVE SPE, LLC and your check(s) totaling \$125.00. However, the enclosed documenthas not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes,this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$638.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 414A00014

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: Center Street Lending Fund IV SPE, 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 and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) November 5, 2013 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 18301 Von Karman Ave, Ste 330, Irvine, CA 92612 (Street Address of Principal Office) 18301 Von Karman Ave, Ste 330, Irvine, CA 92612 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Stephen P. Couig, Manager, 18301 Von Karman Ave, Ste 330, Irvine, CA 92612 David Frosh, Manager, 18301 Von Karman Ave, Ste 330, Irvine, CA 92612 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 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 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.) Dag Wilkinson 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 Limited	Liability Company is:	
Center Street Lending Fund I	V SPE, LLC	
If unavailable, the alternate	to be used in the state of Florida is:	
2. The name and the Florid	a street address of the registered agent and office are:	
Corporation	Corporation Service Company	
	(Name)	AUG SION D
1201 Hays	Street	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		PM 2:
Tallahassee	32301 FL	
	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 605, Florida Statutes.

Corp	oration Service Cor	npany	
Ву:	Emily	Lean	ASS+VF
	9	(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 "CENTER STREET LENDING FUND IV SPE,

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 SECOND DAY OF JULY, A.D.

2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTER STREET LENDING FUND IV SPE, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2014.

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

5503307 8300

140915274

AUTHENT CATION: 1506724

DATE: 07-02-14

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