

MI 0000004096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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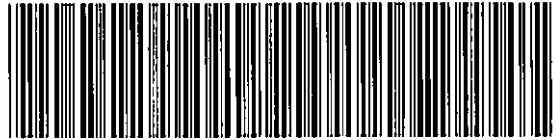
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2018 APR 26 A 9:38

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18 APR 26 PM 1:41

2018 APR 26 PM 1:41

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 182298 4320229

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : April 26, 2018

ORDER TIME : 12:07 PM

ORDER NO. : 182298-005

CUSTOMER NO: 4320229

TALLAHASSEE, FL 32301

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FOREIGN FILINGS

NAME: CSFB 2007-C2 METRO SQUARE 95  
OFFICE PARK 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: Emily Croft -- EXT# 62925

EXAMINER: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 27, 2018

CSC

**RESUBMIT**

Please give original  
submission date as file date.

SUBJECT: CSFFB 2007-C2 METRO SQUARE 95 OFFICE PARK LLC  
Ref. Number: W18000039768

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AMASSI, FLORIDA

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We have received your document for CSFFB 2007-C2 METRO SQUARE 95 OFFICE PARK LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

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.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 718A00008690

11:44 AM 12 APR 18

www.sunbiz.org

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CSFB 2007-C2 METRO SQUARE 95 OFFICE PARK 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:

Judy Graybeal, Paralegal

Name of Person

Kilpatrick Townsend & Stockton LLP

Firm/Company

1100 Peachtree Street, Suite 2800

Address

Atlanta, Georgia 30309

City/State and Zip Code

jgraybeal@kilpatricktownsend.com

E-mail address: (to be used for future annual report notification)

TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Judy Graybeal 404 815-6092  
Name of Contact Person at ( ) 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:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. CSFB 2007-C2 METRO SQUARE 95 OFFICE PARK 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 include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. 82-5317480  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 475 5th Avenue  
(Street Address of Principal Office)  
New York, NY 10017

6. 475 5th Avenue  
(Mailing Address)  
New York, NY 10017

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Corporation Service Company

(Registered agent's signature)

Emily Croft  
Asst. Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>See attached</u>		

(Use attachments if necessary)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Eric J. Berardi  
Signature of an authorized person

Eric J. Berardi, Authorized Person

Typed or printed name of signee

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2018 APR 26 A 9 38  
TALLAHASSEE, FLORIDA

Attachment for: Florida Foreign LLC Registration for  
**CSFB 2007-C2 METRO SQUARE 95 OFFICE PARK LLC**

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**MEMBER:**

**U.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE, SUCCESSOR-IN-  
INTEREST TO BANK OF AMERICA, N.A., AS TRUSTEE, SUCCESSOR TO  
WELLS FARGO BANK, N.A., AS TRUSTEE, FOR THE REGISTERED  
HOLDERS OF CREDIT SUISSE FIRST BOSTON MORTGAGE SECURITIES  
CORP., COMMERCIAL MORTGAGE PASS-THROUGH CERTIFICATES,  
SERIES 2007-C4**

c/o Torchlight Loan Services, LLC  
475 5<sup>th</sup> Avenue  
New York, New York 10017

**FILED**

**2018 APR 26 A 9 39**

**TALLAHASSEE, FLORIDA**

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CSFB 2007-C2 METRO SQUARE 95 OFFICE PARK 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 TWENTY-SIXTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CSFB 2007-C2 METRO SQUARE 95 OFFICE PARK LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

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2018 APR 26 A 9 38  
TALLAHASSEE, FLORIDA



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SR# 20183047741

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202585380

Date: 04-26-18