

**MA 6000000520**

\_\_\_\_\_  
 (Registrar Name)

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City/State/Zip      Phone #

Office Use Only

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 DIVISION OF CORPORATIONS  
 96 DEC 23 PM 3:55

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. TNI Funding Company I, L.L.C  
 (Corporation Name)      (Document #)
2. \_\_\_\_\_  
 (Corporation Name)      (Document #)
3. \_\_\_\_\_  
 (Corporation Name)      (Document #)
4. \_\_\_\_\_  
 (Corporation Name)      (Document #)

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 -12/27/96--01082--010  
 \*\*\*\*140.00 \*\*\*\*140.00

- ☒ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

*File  
Second*

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

G. TAX \_\_\_\_\_  
 FILING 105  
 R. AGENT FEE 35  
 C. COPY \_\_\_\_\_  
 TOTAL 140.00  
 N. BANK \_\_\_\_\_  
 BALANCE DUE \_\_\_\_\_  
 REFUND \_\_\_\_\_

12/23/96

Examiner's Initials	<i>317</i>
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# 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:

TNI Funding Company I, L.L.C.

(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present. Please Note: L.L.C. is not an acceptable suffix in Florida.)

2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. applied for  
(FEI number, if applicable)

4. 12/17/96  
(Date of Organization)

5. fifteen years  
(Duration: Year limited liability company will cease to exist or "perpetual")

6. 12/23/96  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 11900 Biscayne Boulevard, Suite 460B

North Miami, Florida 33181

(Street address of principal office)

8. List and indicate in title space provided the name, title, and business address of each managing member[MGRM] or manager[MGR]. It is not necessary to list members.  
(attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
<u>TNI Funding I, Inc.</u>	<u>MGRM</u>	_____	_____
<u>11900 Biscayne Boulevard</u>		_____	
<u>Suite 460A</u>		_____	
<u>North Miami, FL 33181</u>		_____	
<u>Structured Finance, L.L.C.</u>	<u>MGRM</u>	_____	_____
<u>330 Madison Avenue, 28th Floor</u>		_____	
<u>New York, NY 10017</u>		_____	
_____		_____	

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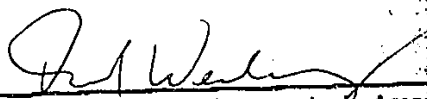
**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN  
LIMITED LIABILITY COMPANY**

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The undersigned member or authorized representative of a member of \_\_\_\_\_

TNI Funding I, Inc. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 1,000,000
- 3) if any, the agreed value of property other than cash contributed by member(s) is  
\$ \_\_\_\_\_. A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is  
\$1,000,000. This total includes amounts from 2 and 3 above.



Signature of a member or authorized representative of a member.  
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit  
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**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, ORGANIZED UNDER THE LAWS OF  
THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: TNI Funding Company I. L.L.C.

2. The name and address of the registered agent and office is:

David Weinberg

(Name)

11900 Biscayne Boulevard, Suite 460

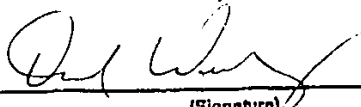
(P.O. Box or Mail Drop Box NOT acceptable)

North Miami, Florida 33181

(City/State/Zip)

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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 appoint-  
ment 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.



(Signature)

December 20, 1996

(Date)

State of Delaware  
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TNI FUNDING COMPANY I, L.L.C." 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 TWENTIETH DAY OF DECEMBER, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TNI FUNDING COMPANY I, L.L.C." WAS FORMED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 1996.

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

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*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION: 8254281

DATE: 12-20-96