

Filing Fee: \$150.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:
Spirit Master Funding IV, LLC
2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

3. The limited liability company is organized under the laws of Delaware
4. The date of its organization is 03/02/2007
5. The period of duration of the limited liability company is (if perpetual, so state) Perpetual
6. The address of the limited liability company's resident agent in Rhode Island is:
10 Weybosset Street Providence, RI 02903
(Street Address, not P.O. Box) (City/Town) (Zip Code)
and the name of the resident agent at such address is C T Corporation System
(Name of Agent)
7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.
8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:
c/o The Corporation Trust Company, 1209 Orange Street, Wilmington, DE 19801
9. The mailing address for the limited liability company is:
14631 N. Scottsdale Ave., Suite 200, Scottsdale, AZ 85254-2711

Form No. 450
Revised: 12/05

FILED

DEC 19 2007

By [Signature]

12:22

10. Management of the Limited Liability Company:

- A. The limited liability company is to be managed ☐ by its members. (If you have checked this box, go to item no. 11.)

or

- B. The limited liability company is to be managed ☒ by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)

<u>Manager</u>	<u>Address</u>
Morton H. Fleischer	14631 N. Scottsdale Road, Suite 200, Scottsdale, AZ 85254-2711
Christopher H. Volk	14631 N. Scottsdale Road, Suite 200, Scottsdale, AZ 85254-2711
Catherine Long	14631 N. Scottsdale Road, Suite 200, Scottsdale, AZ 85254-2711

11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: December 17 2007

Spirit Master Funding IV, LLC

Print Exact Name of Limited Liability Company Making Application

By

Signature of authorized person

Catherine Long

Delaware

PAGE 1

The First State

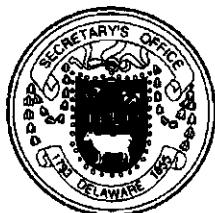
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPIRIT MASTER FUNDING IV, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF DECEMBER, A.D. 2007.

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

4310748 8300

071332910

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



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6245888

DATE: 12-17-07