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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:				/) 1 4 4
	C-III Asset Management LLC			, , , , , , , , , , , , , , , , , , ,	
2.	The name, if different, under which it proposes to register an	d transact business in Rho	ode Island is:		
3.	The limited liability company is organized under the laws of	Delaware			
4.	The date of its organization is 03/05/2010				ت ــــــــــــــــــــــــــــــــــــ
5.	The period of duration of the limited liability company is (if pe	erpetual, so state) Perpetua	1		7)
6.	The address of the limited liability company's resident agent	in Rhode Island is:			, - -
	155 South Main Street, Suite 301	Providence	, RI <u>02903</u>		
	(Street Address, <u>not</u> P.O. Box)	(City/Town)		(Zip Coo	ie)
	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 time there is no resident agent or if the resident agent canno diligence.				
8.	The address of any office required to be maintained in the limited liability company is organized is:	e state or other jurisdiction	n under the la	ws of	which the
	1209 Orange Street, Wilmington, DE 19801				
9.	The mailing address for the limited liability company is:		· -		
	5221 N. O'Connor Boulevard, Suite 600, Irving, TX 75039		<u></u>		
		AUG 10 20	10		
	rm No. 450 vised: 12/05	12415	8.		
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1 0	10.	Management of the Limited Liability (Company:	
	Α.	The limited liability company is to be no. 11.)	managed by its members. (If you have checked this box, go to item	
			<u>or</u>	
	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>	
	_			
	_			
	_			
			tificate of good standing duly authenticated by the secretary of state or othe 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:	7/30/2010	C-III Asset Management LLC Print Exact Name of Limited Liability Company Making Application	
			By Signature of authorized person	
			y Signature of authorized person	

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "C-III ASSET MANAGEMENT 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 FIFTH DAY OF AUGUST, A.D. 2010.

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

3486119 8300

100803873

AUTHENTICATION: 8154795

DATE: 08-05-10

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



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

