

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 12/20/2021

****WALK IN****

ENTITY NAME MEPT Sawgrass Center LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$55

ACCOUNT #: I2016000072

S R JMO

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEPT Sawgrass Center LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lakecia Stanford

Name of Person

Revantage Corporate Services

Firm/Company

233 S. Wacker Drive, Suite 4700

Address

Chicago, IL 60606

City/State and Zip Code

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

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: MEPT Sawgrass Center LLC

Enter new principal office address, if applicable: 10920 Via Frontera, Suite 220

**(Principal office address
MUST BE A STREET ADDRESS)**

San Diego, CA 92127

Enter new mailing address, if applicable:

**(Mailing address
MAY BE A POST OFFICE BOX)**

10920 Via Frontera, Suite 220

San Diego, CA 92127

2. The Florida document number of this limited liability company is: M11000001927

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: April 18, 2011

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: BCORE Sawgrass Center LLC
(must contain "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 contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, **Florida** _____
City *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

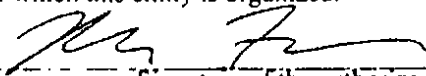
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

The name and usual business address of the Manager(s) as follows: BREIT Retail Holdco LLC, 10920 Via Frontera, Suite 220, San Diego, CA 92127

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Manager	MEPT Edgemoor REIT LLC	c/o NewTower Trust Company, J Bethesda Metro Center, Suite 1460 Bethesda MD 20814	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Manager	BREIT Retail Holdco LLC	10920 Via Frontera, Suite 220 San Diego, CA 92127	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



 Signature of the authorized representative

Mike Forman, Managing Director and Vice President

 Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "BCORE SAWGRASS CENTER LLC" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF FORMATION, FILED THE FIFTH DAY OF APRIL, A.D. 2011, AT 5:31 O`CLOCK P.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "MEPT SAWGRASS CENTER LLC" TO "BCORE SAWGRASS CENTER LLC", FILED THE SEVENTEENTH DAY OF DECEMBER, A.D. 2021, AT 10:17 O`CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "BCORE SAWGRASS CENTER LLC".




Jeffrey W. Bullock, Secretary of State

STATE of DELAWARE
CERTIFICATE of FORMATION
OF
MEPT SAWGRASS CENTER LLC

FIRST: The name of the limited liability company is: MEPT Sawgrass Center LLC.

SECOND: The address of its registered office in the State of Delaware is: Corporation Trust Center, 1209 Orange Street, Wilmington, Delaware 19801. The name of its Registered Agent at such address is: The Corporation Trust Company.

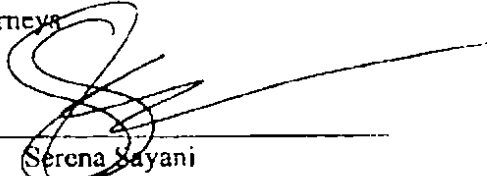
IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation of MEPT Sawgrass Center LLC on this 5th day of April, 2011.

MEPT Sawgrass Center LLC:

By: MEPT Edgemoor REIT LLC

By: McNaul Ebel Nawrot & Helgren PLLC,
its attorneys

By: _____


Serena Sayani
Authorized Person

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT TO THE
CERTIFICATE OF FORMATION
OF
MEPT SAWGRASS CENTER LLC**

It is hereby certified that:

FIRST: The name of the limited liability company (hereinafter called the "limited liability company") is: **MEPT Sawgrass Center LLC**

SECOND: The Certificate of Formation of the limited liability company is hereby amended by striking out paragraph 1 thereof and by substituting in lieu of said paragraph the following new paragraph 1:

"FIRST: The name of the limited liability company is **BCORE Sawgrass Center LLC"**

IN WITNESS WHEREOF, the undersigned executed this Certificate of Amendment on the 16 day of December, 2021.

By:



Name: **Mike Forman**

Title: **Managing Director and Vice President**