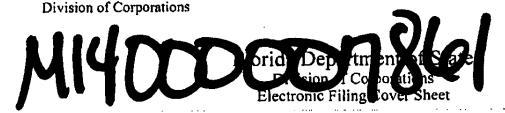
Page 1 of 1



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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

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Foreign Limited Liability Company **BVP Tenant, LLC**

Certificate of Status	1
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S. YOUNG

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		COVE	R LETTER		
	tration Section ion of Corporations				
SUBJECT:		BVP TEN	ANT, LLC		
		Name of Limited	Lisbility Company		-
Existence, and	check are submitted	gn Limited Liability Comp to register the above reference.	nced foreign limited liabil		
	Karen Ewing				
		Na	me of Person		_
	JMB Realty Corp	oration			_
		Fir	m/Company		_
	900 North Michig	an Avenue, Suite 1400			_
			Address		
	Chicago, Illinois	60611			
			ate and Zip Code		下层 下
	ewingk@jmb.com	•			
	CWINGE COLLEGE		for future annual report noti	fication)	
For further int	formation concerning	this matter, please call:			29.
Kare	en Ewing		at/ 312 \ 915-	1969	
		Contact Person	41 (Daytime Telephone Number	<u> - 교명</u> 영
Divi Regi P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 thassee, FL 32314	Division Registra Cliffon 2661 E	T ADDRESS; n of Corporations alion Section Building acceutive Center Circle assee, FL 32301		· 影中 · 海
	a check for the for 125.00 Filing Fee	ollowing amount: \$130.00 Filing Fee & Certificate of Status	S155,00 Filing Fee & Certified Copy	≥ S160.00 Filing Fee of Status & Certifi	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1 BYP Te	nant, LLC	BUSINESS IN THE STATE OF FLORIDA:	
(Name of Foreign Lin	nited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LL	C?")
(15-a	and and forth and the		
Liability Company," "LLC," or "L	LC.")	masseting business in Florida. The alternate name n	MIST INCIDISE "Limited
2. Delaware	3	3. 47-2197652	三字道 グー
(Jurisdiction under the law of whicompany is organized)	ich foreign limited liability	(FEI number, if applicable)	空間 8 寸
4.			一题 7
((Date first transacted business in See sections 605,0904 & 605,0905,	Florida, if prior to registration.) P.S. to determine penalty liability)	
5		n Avenuc, Suito 1450	五. 第
	Chicago III	linois 60611	9
		of Principal Office)	<u> </u>
5	900 North Michigan	a Avenue, Suite 1450	
	Chicago III	linois 60611	
		ng Address)	
7 The name title or gons	nity and addrage of the new	on(s) who has/have authority to mana	na iclara:
•	•		50 12 410.
Craig Caffarelli - Manager	900 North Michigan Avenue	Suite 1450 Chicago, Illinois 60611	
Barry A. Malkin - Manager	900 North Michigan Avenue	, Suite 1450 Chicago, Illinois 60611	
Eric Siegel - Manager	900 North Michigan Avenue,	Suite 1450 Chicago, Illinois 60611	
		nore than 90 days old, duly authentical e law of which it is organized. (A photo	
		translation of the certificate under oat	
must be submitted)			
)	
	Haron H Ewe	<u> </u>	
I'm prenntance with section 604 0703	Signature of a	n suphorized person dilutes an affirmation under the penalties of penjury that	the facts statud become are total
am aware that any folse information sub	mitted in a document to the Department	of State constitutes a third degree felony as provided for	in s.\$17.155, F.S.)
•	Karen M. Ewing. Au	thorized Representative	
		name of signee	

1. The name of the Limited Liability Company is:

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	BVP Tens	int, LLC		
If unavailabl	e, the alternate to be u	sed in the state of Florid	ia is:	
		·		<u> </u>
2. The name	e and the Florida street	address of the registere	d agent and office are:	CVETA
	C T Corporation Sys	tem		- 22年 1
		(Name)		i jii y
	1200 South Pinc Isla	nd Road		S S S S
	Florid	a Street Address (P.O. Box N	OT ACCEPTABLE)	S.T.
	Plantation	FL 33		_
	<u></u>	City/State/7.	lp	
liability com registered as statutes rela	pany at the place desig gent and agree to act it ting to the proper and	gnated in this certificate, n this capacity. I further complete performance o on as registered agent as	ce of process for the above so I hereby accept the appoint agree to comply with the profined for the complete for the complet	ment as rovisions of all ar with and 5, Florida
		(Signature) 0	Projetani Je	astan
		\$ 25.00 Designation \$ 30.00 Certified C	for Application a of Registered Agent lopy (optional) of Status (optional)	•

Delaware

DACE S

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY "BVP TENANT, 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-NINTH DAY OF OCTOBER, A.D. 2014.

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

5621984 8300

141349051

You may verify this cortificate onlin at corp.doleware.gov/authwor.shtml Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 1820745

DATE: 10-29-14