(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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S. WARREN JUN 0 5 2017

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 664968 75803

AUTHORIZATION : C

COST LIMIT : \$ 125.00

ORDER DATE: May 31, 2017

ORDER TIME : 1:11 PM

ORDER NO. : 664968-010

CUSTOMER NO: 7580356

FOREIGN FILINGS

NAME: ARG BHJCKFL001, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	ARG BHJCKFI	.001, LLC						
		Name of	Limited Liability	Company		•		
		reign Limited Liability Comp ed to register the above refer						
Please return a	II correspondence	concerning this matter to the	following:					
	Carla A. Tho		· · · · · · · · · · · · · · · · · · ·			_		
		N	ame of Person					
	AR Global							
	Firm/Company							
	7621 Little Ave, Suite 200							
Address								
	Charlotte, NC	28226				_		
		City/S	tate and Zip Code					
	cthomas@ar-g							
		E-mail address: (to be use	d for future annual	report not	ification)	•		
For further info	ormation concerning	g this matter, please call:						
Ako	mea Poku-Kankan	1	at (704) 626-	-4401			
	Name o	of Contact Person	Area Code	Day	time Telephone Number			
Divisi Regisi P.O. F	on of Corporations tration Section Box 6327 hassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301			
	heck for the follow 25.00 Filing Fee	ving amount: \$\Bigsire\$ \$\\$130.00\$ Filing Fee & Certificate of Status	□ \$155.00 Filit Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ARG BHJCKFL001, I		apany; must include "Lim	ited Liability Company," "L.1	L.C.," or "LLC.")
(If name unavailable, enter a	Itemate name adopted for t	the numose of transacting	husiness in Florida. The alter	nate name must include "Limited
Liability Company," "L.L.C,		ne purpose of transacting	business in I korda, The arei	hate hane must mende estimed
2. Delaware		3.		
company is organized)	of which foreign limited li	ability	(FEI number, if ap	plicable)
4. 6/01/2017	(Data Carta			
	(See sections 605.09	eted business in Florida, if 204 & 605.0905, F.S. to de	prior to registration.) etermine penalty liability)	
5. 106 York Rd				
Jenkintown, PA 1904	6			
	(Street A	ddress of Principal Office)	
6				
				FS 😕
·		(Mailing Address)		
7. Name and street addre	ce of Florida registered a	gent: (PA Boy NOT	accentable)	SSE ~ LE
	SS of Florida registered a Corporation Service (_	_acceptable)	F 5 0
Name:				FEC 9:
Office Address:	1201 Hays Street	<u>.</u>) A 1-2
	Tallahaasaa		, Florida <u>32301</u>	P
	Tallahassee	(City)	Zip c	
Registered agent's accep		coant camilea of naceas	for the above stated corn	oration at the place designated in
				icity. I further agree to comply
			rformance of my duties, a	and I am familiar with and accept
the obligations of my pos	Corporation Service (Company フォュー	P 1	Melissa Zender
	Ву:	111-	my D	Asst. Vice President
		(Registered agent's sig	nature)	
8. The name, title or capa	acity and address of the	person(s) who has/have	authority to manage is/are	::
American Finance Op	erating Partnership, LP;	Member - 106 York Ro	d; Jenkintown, PA 19046	
Jesse C. Galloway, Au	thorized Representative	- 106 York Rd: Jenkint	own PA 19046	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The state of the s	, , , , , , , , , , , , , , , , , ,	,	
	 			
				having custody of records in the
		. (If the certificate is in	a foreign language, a trans	lation of the certificate under oath
of the translator must be s	ubmitted)			
				····
		Signature of an authorize	d person	
	true. I am aware that any			n under the penalties of perjury that Department of State constitutes a third
		Jesse C. Galloway		

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ARG BHJCKFL001, 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 FIRST DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARG BHJCKFL001, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2017.

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

Aume

Authentication: 202630203

Date: 06-01-17

6429938 8300 SR# 20174455447