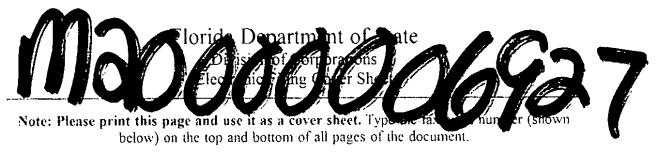
Division of Corporations



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## Foreign Limited Liability Company NLP II Cecil Commerce Center, LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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

IN COMPLEME, WITH SECTION 605 0912, FLORIDA STATUTEN THE FOLLOWING IN SERMITTED TO REGISTER A FORESCIN-LIMITED LIABILITY

COMPANYOTRANSACIBUSINESSYHKTATIOH/LORIDA: NLP II Cecil Commerce Centér, LLC (Name of Foreign Limited Unitality Company, mary include "Limited Liability Company," L.L.C., or "LLC") off name manufable constructions abetrage name adopted for the purpose of transacting business in Darid. The abstrage name most metade "Littled Links" is Company, "SLLC," or TEC." (11) number, if applicable) (Incredication under the law of which foreign lettined leability company econganization Upon filing (Date first transacted business in Honda: if poler to regestration). (See sections 605 0904 & 605 0905, E.S. to determine penalty highlight). Four Embarcadero Center, Suite 3300 Four Embarcadero Center, Suite 3300 6. (Markog Address) Street Address of Principal Office) San Francisco, CA 94111 San Francisco, CA 94111 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C.T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation . Florida Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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. Muddle Helling Meredith Hellwig, Assistant Secretary

(Yestalered agent a signal wie)

PERSON (12) (2004) Marrie State of State

8. For initial indexing purposes, fist names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

Title Or Canacity:	Name and Address:	Title Or Capacity	i	Name and Address:		
Manager	Name: NLP II Holdings REIT, LEC	□Manager	Name:			
Member	Address: Embarcadero Center	□Member	Address:			
□ Authorized	Suite 3300	□Authorized				
Person	San Francisco, CA 94111	Person				
☐ Other		□Other		∐Other		
□Manager	Name:	∏Manager	Name:	<u>.</u>		
Member	Address:	☐ Member	Address:			
□Authorized		□Authorized				
Person		Person				
Other	DOther	□ Other	<del></del> -	□ Other		
□Manager	Name:	□Manager	Name:			
UMember	Address:	Ŭ Member	Address:			
□Authorized		☐ Authorized				
Person		Person				
[] Other	Other	□Other		□Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted).  10. This document is executed in accordance with section 605,0203 (1) (b), Florida Statules. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$ 817,155, I'.S.						
Signature of an externized person						
zišweine, ni su svetivatika brzava						

Typed or provided water of segrees

Kristin Renaudin

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "NLP II CECIL COMMERCE CENTER, 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 TENTH DAY OF AUGUST, A.D. 2020.

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

and the second s

Authentication: 203440364

Date: 08-10-20