

9/12/2019

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H19000273608 3)))



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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION  
COLE OPERATING PARTNERSHIP IV, LP

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
| Page Count            | 04       |
| Estimated Charge      | \$105.00 |

Electronic Filing Menu

Corporate Filing Menu

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19 SEP 12 PM 7:20  
 F-11-20  
 PAUL J. TANKS III, ESQ.  
 JAMES TANKS III, ESQ.

**AMENDMENT TO CERTIFICATE OF AUTHORITY  
 FOR  
 FOREIGN LIMITED PARTNERSHIP OR  
 LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:  
COLE OPERATING PARTNERSHIP IV, LP
2. The jurisdiction of its formation is: Delaware
3. The date the entity was authorized to transact business in Florida is: 5/14/2012
4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:  
CIM Real Estate Finance Operating Partnership, LP

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., L.P., or Ltd.*

*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P., or L.L.L.P.*

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

| <u>Name:</u> | <u>Business Address:</u> |
|--------------|--------------------------|
| _____        | _____                    |
| _____        | _____                    |
| _____        | _____                    |
| _____        | _____                    |
| _____        | _____                    |
| _____        | _____                    |
| _____        | _____                    |
| _____        | _____                    |
| _____        | _____                    |

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

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

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8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

☐

The entity elects to be a limited liability limited partnership.

☐

The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, 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.

10. Effective date, if other than the date of filing: \_\_\_\_\_  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:



Typed or printed name:

Michael J. Komenda for CIM Real Estate Finance Trust, Inc.

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

FILED  
19 SEP 12 PM 7:20  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "COLE OPERATING  
PARTNERSHIP IV, LP", FILED A CERTIFICATE OF AMENDMENT, CHANGING  
ITS NAME TO "CIM REAL ESTATE FINANCE OPERATING PARTNERSHIP, LP"  
ON THE FIFTEENTH DAY OF AUGUST, A.D. 2019, AT 3:46 O'CLOCK P.M.

FILED  
19 SEP 12 PM 7:26  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State