11/15/23, 10:45 AM

Division of Corporations

Elorida Department of State

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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 : (614)280-3338

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

Email Address: JEREMY.PUENTES@CTSERVICETEAM.COM

FLORIDA/FOREIGN LP/LLLP STARWOOD REIT OPERATING PARTNERSHIP, L.P.

Certificate of Status	0
Certified Copy	1
Page Count	04
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Help

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

Starwood REIT C	perating Partnership, L.P.						
<i>жесертары</i> глинеа	perating Partnership, L.P. Limited Partnership or Limited Liabili Partnership suffixes: Limited Partnershi Liability Limited Partnership suffixes: L	ιρ, Lim	ited, L.P., LP, or Ltc	<i>l</i> .			
If name unavailable	e, name under which the limited partners business in Florida		imited liability limit contain acceptable s		oposes to re	gister to	transact
2 Delaware			3. July 13, 2017				
State or Country of Formation 4. Federal Employer Identification Number 82-2290109			D	ate of Formation	<u> </u>		
5. Name of Register	red Agent for Service of Process and Fl	lorida	Street Address:				
C T Corporation	n System						
1200 South Pin	ne Island Road						
Plantation, Flo	orida 33324						
6. Thereby accept the of all statutes release my position as reg	By: C T Corporat	ion Sy	(my duties, and I an	r familiar with an	d accept the	obligatio	ons of
7. Principal Office:		8. M.	ailing Address:				
•			Collins Avenue				
Miami Beach, FL 33139		Miar	Miami Beach, FL 33139			2023 NOV 15	
					[:: 1 : 2	401	1
9. If limited partne	rship is a limited liability limited partr	nership	o, check box. □), (), ();		January 1
10. Name, principa	d office address, and mailing address o	of each	general partner:		773 713 713	PM 6:	ۇ <u>مىمۇ</u>
Name of Genera	Partner: Starwood Real Estate Income Trus	st, Inc.	Name of General I	artner:	四氢	÷:	التصافة
Street Address:	2340 Collins Avenue				<i>[</i> *1	.90	
	Miami Beach, FL 33139		_				
Mailing Address:	2340 Collins Avenue		Mailing Address:_				
	Miami Beach, FL 33139						
Name of Genera	l Partner:		Name of General I	artner:			
Street Address:			Street Address;		<u></u>		
Mailing Address			Mailing Address:				

Page 1 of 2

Name of General Partner:	Name of General Partner:	
Street Address:	Street Address:	
Mailing Address:	Mailing Address:	
11. Effective date, if other than the date of a (Effective date cannot be prior to nor more the Note: If the date inserted in this block does not document's effective date on the Department.	ling: n 90 days after the date this document is filed by the Florida Department of State meet the applicable statutory filing requirements, this date will not be listed as f State's records.	i <i>te.)</i> the
12. Attached is a certificate of existence duly a Florida Department of State, by the Secretary the law of which it is organized.	uthenticated, not more than 90 days prior to the delivery of this application to the figure of the delivery of the application to the fitter of the delivery of the entity's records in the jurisdiction	he 1 under
Signed this 14 day of N	,20 <u>23</u>	
-	Signature of a general partner	

The individual signing this document affirms that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

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

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "STARWOOD REIT OPERATING PARTNERSHIP,

L.P." 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 FOURTEENTH DAY OF NOVEMBER, A.D. 2023.

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

Authentication: 204591699

Date: 11-14-23