

DI80000000020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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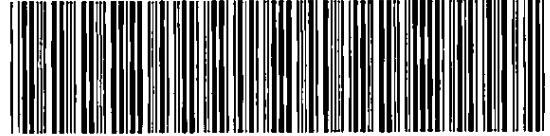
(Business Entity Name)

(Document Number)

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FILED  
18 APR 17 PM 12:18  
18 APR 13 AM 11:26  
T. SCHROEDER

APR 17 2018  
T. SCHROEDER

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 160394 7495878

AUTHORIZATION :

CHECK ATTACHED FOR FILING

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ORDER DATE : April 12, 2018

ORDER TIME : 8:36 AM

ORDER NO. : 160394-005

CUSTOMER NO: 7495878  
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FOREIGN FILINGS

NAME: BR AXIS WEST, DST

XXXX QUALIFICATION (TYPE: BST)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER: \_\_\_\_\_

**AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE  
TO FILE OR QUALIFY**

BR Axis West, DST

A Delaware TRUST

In accordance with Section 609.02 of the Florida Statutes, pertaining to  
Common Law Declarations of Trust, the undersigned, the Chairman of the  
Board of Trustees of BR Axis West, DST, a

(Name of Trust)

Delaware

Trust hereby affirms in order to file or qualify

(State)

BR Axis West, DST

, in the State of Florida,

(Name of Trust)

1. Two or more persons are named in the Trust.

2. The principal address is \_\_\_\_\_

27777 Franklin Rd, Suite 900, Southfield, MI 48034

3. The registered agent and street address in the State of Florida is:  
Corporation Service Company

1201 Hays Street, Tallahassee, FL 32301

4. Acceptance by the registered agent: Having been named as registered  
agent to accept service of process for the above named Declaration of Trust  
at the place designated in this affidavit, I hereby accept the appointment as  
registered agent and agree to act in this capacity.

*Emily Croft*

Emily Croft

(Signature of Registered Agent) Asst. Vice President

5. I certify that the attached is a true and correct copy of the Declaration of  
Trust under which the association proposes to conduct its business in  
Florida.

Delaware Trust Company,  
not in its individual capacity  
but solely as Trustee

Name: \_\_\_\_\_

Alan R. Halpern  
Vice President

Chairman of the Board of Trustees

Filing Fee: \$350.00  
Certified Copy: \$ 8.75 (optional)



FILED  
16 APR 17 PM 12:10

## STATE of DELAWARE CERTIFICATE of TRUST

This Certificate of Trust is filed in accordance with the provisions of the Delaware Statutory Trust Act (Title 12 of the Delaware Code, Section 3801 et seq.) and sets forth the following:

• **First:** The name of the trust is BR Axis West, DST

• **Second:** The name and address of the Delaware trustee is

Delaware Trust Company, 251 Little Falls Drive,  
Wilmington, Delaware 19808

• **Third:** (Insert any other information the trustees determine to include therein.)

By: 

Name: Alan Hagerman  
Title: Authorized Officer

Name: Delaware Trust Company,  
solely in its capacity as  
Delaware Trustee

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18 APR 17 PM 12:10  
DELAWARE