

**F12000001993**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

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

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

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**QIC GRE Management (US), Inc.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 06      |
| Estimated Charge      | \$70.00 |

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TALLAHASSEE, FLORIDA  
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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** QIC GRE Management (US), Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Ms. Belinda Bones

Name of Person

QIC GRE Management (US), Inc.

Firm/Company

GPO Box 2242

Address

Brisbane, Qld 4001 AUSTRALIA

City/State and Zip code

corporatesecretariat-qic@qic.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ms. Robin Bennett

at (310) 284-3219

Name of Person

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☒ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

**1. QIC GRE Management (US), Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. Maryland**

(State or country under the law of which it is incorporated)

**3. 36-4717506**

(FEI number, if applicable)

**4. 11/15/2011**

(Date of incorporation)

**5. perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6. upon qualification**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 222 N. Sepulveda Blvd., Suite 2350, El Segundo, CA 90245-5660**

(Principal office address)

**222 N. Sepulveda Blvd., Suite 2350, El Segundo, CA 90245-5660**

(Current mailing address)

**8. real estate investment**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: **C T Corporation System**

Office Address: **1200 South Pine Island Road**

**Plantation**

(City)

**Florida 33324**

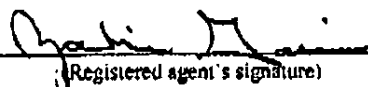
(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation 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.*

C T Corporation System

By:

  
(Registered agent's signature)

**11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.**

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Director:  
Chairman: David Hurvey

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

Director:  
Vice Chairman: Gregory Karns

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

Director: Robert Carter

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

Director: Steven Plenge

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

**B. OFFICERS**

President: Douglas McTaggart

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

Vice President: Refer attached list

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

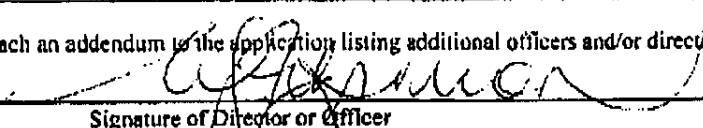
Secretary: Carleen Fitzsimon

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

Treasurer: Claire Blake

Address: Level 5, Central Plaza II, 66 Eagle Street, Brisbane Qld 4000, Australia

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she 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.

14. Carleen Fitzsimon, Secretary

(Typed or printed name and capacity of person signing application)

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**QIC GRE Management (US), Inc.**

**Vice-Presidents**

**Claire Marite Blake**

**Paul Robert Leitch**

**Willem Gabriel Jordaan**

**David James Addis**

**Carteen Gay Filtzsimon**

**Belinda Gaye Bones**

**David William Edward Harvey**

**Gregory James Karns**

**Martin Patrick Griffin**

**Matthew Strotton**

**Peter Charles Gamin**

**Robert James George Carter**

**Steven Mark Plenge**

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**STATE OF MARYLAND**  
**Department of Assessments and Taxation**

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT QIC GRE MANAGEMENT (US), INC., INCORPORATED NOVEMBER 15, 2011, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 29, 2012.

*Paul B. Anderson*

Paul B. Anderson  
Charter Division

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301 West Preston Street, Baltimore, Maryland 21201  
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MRS (Maryland Relay Service) (800) 735-2258 TT/Voice  
Fax (410) 333-7097

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