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DISSOLUTION OR WITHDRAWAL BIOMED REALTY TRUST, INC.

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COVER LETTER

TO:	Amendment Section		
	Division of Corporations		
SUBJ	ECT: BioMed Realty Trust, Inc.		
		(Name of Corporation	n)
DOCI	JMENT NUMBER: F13000003193		
The en	closed withdrawal application and	fee are submitted for f	iling.
	return all correspondence concerning to the following:	g this	
	Jonathan Klassen		
		(Name of Person)	
	BioMed Realty Trust, Inc.		
		(Firm/Company)	
	17190 Bernardo Center Drive		
		(Address)	
	San Diego, CA 92128		
	(0	City/State and Zip code)
For fur	ther information concerning this mat	ter, please call:	
Christin	e Burger	at ()_	85-9840
Enclos	(Name of Person) ed is a check for the amount:	(Area Coo	le & Daytime Telephone Number)
\$35	Filing Fee \$\int_\$43.75 Filing Fee & [Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	Certificate of Status & Certified
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL, 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

BioMe	d Realty Trust, Inc.	
	(Name of Corporation	n)
F13000	0003193	
	(Document Number of Corporation	n (if known)
Maryla		
	(Incorporated Under Law	rs of)
	n is no longer transacting business or conducting enders its authority to transact business or conduc	
appoints the De	n revokes the authority of its registered agent is partment of State as its agent for service of proauthorized to transact business or conduct affairs	cess based on a cause of action arising during in Florida.
The following i	s a current mailing address for the corporation:	2016
17190	Bernardo Center Drive	
<u> </u>	(Mailing Address)	
Şan Die	ego, CA 92128	
- 	(City/ State /Zip)	
The corporation	agrees to notify the Department of State in the fi	uture of any change in its mailing address.
Λ	er	May 17, 2016
(Signature rocever	of a director, president or other officer - if in the hands of a prother court appointed fiduciary, by that fiduciary)	(Date)
	P. Klassen	Secretary
	yped or printed name of person signing)	(Title of person signing)

FILING FEE \$35