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(Re	equestor's Name)
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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16 SEP 15 AM 8: 00

16 SEP 15 PH 2:03

SEP 16 2016 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

			ACCOUNT NO.	:	I20000001	95	
			REFERENCE	•	291180	4312639	
			AUTHORIZATION	:	mull de	enan	
			COST LIMIT	: 	\$ 25.00		
ORDER	DATE	:	September 14, 2	016			
ORDER	TIME	:	12:31 PM				SEP
ORDER	NO.	:	291180-045				2

FOREIGN FILINGS

NAME:

CUSTOMER NO:

CORNERSTONE REAL ESTATE

ADVISERS LLC

4312639

LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Courtney Williams EXT# 62935
EXAMINER:

COVER LETTER

Division of Corporations	
SUBJECT: Cornerstone Real Estate Advisers L	rc
	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) a	re submitted for filing.
Please return all correspondence concerning this	matter to the following:
Kellie Hoyt, Paralegal	
Name of Person	The second secon
Barings Real Estate Advisers LLC	,
Firm/Company	
One Financial Plaza	
Address	
Hartford, CT 06103	
City/State and Zip Code	Mariana da Ara
khoyt@cornerstoneadivsers.com	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this matter, p	lease call:
	at (): _509-2340
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount: \$\Begin{array}{c} \$25\$ Filing Fee & \$\Begin{array}{c} \$30\$ Filing Fee & \$\Begin{array}{c} \$Certificate of Status \end{array}\$ CR2E055 (9/15)	S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy
Carried (Strait	

16 SEP 15 AM 8: 00

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the Florida	Department of
State: Cornerstone Real Estate Ac	Ivisers LLC	- A - A - A - A - A - A - A - A - A - A
Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited lia	bility company is: M04000	0004720
 3. Jurisdiction of its organization: Delaware 4. Date authorized to do business in Florida: 11/ 		
SECTION II (5-9 complete only the applicable of	• • •	luicare LLC
5. New name of the limited liability company: B (must	t contain "Limited Liability Co	ompany, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	for the purpose of transacting naging members adopting the action or "LLC.")	business in Florida and attach a alternate name. The alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	d officer address on our recor	ds, enter the name of the new.
Name of New Registered Agent:		
New Registered Office Address:		
		da Street Address
نبت	City	, Florida
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ages the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	eistored Agent: at and agree to act in this cap and complete performance of ered agent as provided for in in the registered office addres	ncity. I further agree to comply with iny duties, and I am familiar with Chapter 605, F.S. Or, if this

tle/ Capacity	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00

Typed or printed name of signee

Delaware

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "CORNERSTONE REAL

ESTATE ADVISERS LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING

ITS NAME TO "BARINGS REAL ESTATE ADVISERS LLC" ON THE TWELFTH

DAY OF SEPTEMBER, A.D. 2016, AT 1:37 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

16 SEP 15 AM 8: 00

STURE IANT OF LORIDA



Authentication: 202991853

Date: 09-14-16

3851604 8320 SR# 20165783931