# M0700002355

(Re	questor's Name)			
(Address)				
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to	Filing Officer:			

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DEPARTMENT OF CHAPTER 15

APR 1 5 2016
Y SULKER

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 100555 7452534						
AUTHORIZATION: Spullelena.						
COST LIMIT : \$ 25.00						
ORDER DATE: April 12, 2016						
ORDER TIME : 9:28 AM						
ORDER NO. : 100555-025						
CUSTOMER NO: 7452534						
FOREIGN FILINGS						
NAME: CSH REAL PROPERTY 2, LLC						
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY						
XXXX AMENDMENT						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING						

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT# 62956

### **COVER LETTER**

TO:

Registration Section

Division of Corporations	
SUBJECT: CSH Real Property 2 LLC	
Name of Foreign Limited Liab	ility Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted f	or filing.
Please return all correspondence concerning this matter to the	following:
Yury Tolentino	
Name of Person	•
HCP, Inc.	
Firm/Company	•
1920 Main Street, Suite 1200	_
Address	
Irvine, CA 92614	_
City/State and Zip Code	
HCP@cscinfo.com	
E-mail address: (to be used for future annual report notificat	ion)
For further information concerning this matter, please call:	
	, 407-0700
at (	& 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{align*}	
CR2E055 (9/15)	• •

## 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 appear	ars on the records of the Florida D	Department of		
State: CSH Real Property 2 LLC				
Enter new principal office address, if applicable:				
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )				
Enter new mailing address, if applicable: (Mailing address				
MAY BE A POST OFFICE BOX)		<u> </u>		
2. The Florida document number of this limited I	liability company is: M07000	002355		
3. Jurisdiction of its organization: Delaware		04		
4. Date authorized to do business in Florida: A	pril 24, 2007			
SECTION II (5-9 complete only the applicable	~ .			
5. New name of the limited liability company:	S-H Thirty-Five PropCo – ust contain "Limited Liability Cor	Ground Tenant, LLC npany, ""L.L.C.," or "LLC.")		
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or must contain "Limited Liability Company," "L.L.	nanaging members adopting the al	ousiness in Florida and attach a ternate name. The alternate name		
6. If amending the registered agent and/or registe registered agent and/or the new registered office	ered officer address on our records address here:	s, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	0 01			
	Enter Florid	Enter Florida Street Address		
_	City	, Florida Zip Code		
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered ag the provisions of all statutes relative to the prope and accept the obligations of my position as regi document is being filed to merely reflect a chang liability company has been notified in writing of	gent and agree to act in this capace or and complete performance of n istered agent as provided for in C ge in the registered office address,	ny duties, and I am familiar with hapter 605, F.S. Or, if this		

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
e/ Capacity	<u>Name</u>	Address	Type of Actio		
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forementioned amend	e, if required: no more than 9 Iment(s), duly authenticated b aw of which this entity is of	by the official having custody of records in the			
forementioned amend urisdiction under the I -	Iment(s), duly authenticated be aw of which this entity is of some signature of the second street in the second se	by the official having custody of radized.  If the authorized representative C, its sole member rentures, LLC, its sole member	ecords in the		

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CSH REAL PROPERTY 2 LLC", CHANGING ITS NAME FROM "CSH REAL PROPERTY 2 LLC" TO "S-H THIRTY-FIVE PROPCO - GROUND TENANT, LLC", FILED IN THIS OFFICE ON THE TWENTY-NINTH DAY OF MARCH, A.D. 2016, AT 3:42 O'CLOCK P.M.



Authentication: 202094240 Date: 04-05-16

4330380 8100 SR# 20161946529

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:42 PM 03:29:2016
FILED 03:42 PM 03:29:2016
SR 20161946529 - File Number 4330388

#### CERTIFICATE OF AMENDMENT

TO

#### AMENDED AND RESTATED CERTIFICATE OF FORMATION

OF

#### CSH REAL PROPERTY 2 LLC

This certificate of Amendment to the Amended and Restated Certificate of Formation of CSH Real Property 2 LLC (the "Company"), as amended, is being duly executed and filed pursuant to Section 18-202 of the Delaware Limited Liability Company Act.

FIRST: The name of the limited liability company is CSH Real Property 2 LLC.

SECOND: The Amended and Restated Certificate of Formation of the Company, dated July 7, 2015, as amended on July 9, 2015, is hereby amended by deleting Article FIRST in its entirety and replacing it with the following new Article:

"FIRST: The name of the limited liability company is S-H Thirty-Five PropCo – Ground Tenant, LLC."

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment to Amended and Restated Certificate of Formation on this 29<sup>th</sup> day of March, 2016.

Name: Kendall K. Young Title: Authorized Person