M14000003985

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Entite Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATES
SECRETARY OF STATES



O SIMMONS MAR 1 6 2018



March 14, 2018

CSC

RESUBMIT

Please give original submission date as file date.

SUBJECT: CABOT IV - FL1M01, LLC Ref. Number: M14000003985

We have received your document for CABOT IV - FL1M01, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 818A00005108



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

Phone: 850-558-1500	
ACCOUNT NO.	: I2000000195
REFERENCE	: 110012 7396281
AUTHORIZATION	: Spullelenan
COST LIMIT	: \$ 25.00
ORDER DATE: March 9, 2018	
ORDER TIME : 8:55 AM	
ORDER NO. : 110012-140	
CUSTOMER NO: 7396281	
FOREIGN F	ILINGS
NAME: CABOT IV-FL1M	01, LLC
CORPORATE LIMITED PARTNERSHIP	
XX LIMITED LIABILITY COMPAN	Y
XXXX AMENDMENT	
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY	

EXAMINER:

CONTACT PERSON: Emily Croft -- EXT# 62925

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: Cabot IV - FL1M01, LLC	
Name of Foreign Limited Liability	Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted for fi	iling.
Please return all correspondence concerning this matter to the following	owing:
Ann Schneider	
Name of Person	
Revantage Corporate Services	
Firm/Company	
222 S. Riverside Plaza, #2000	
Address	
Chicago, IL 60606	
City/State and Zip Code	
aschneider@revantage.com	
E-mail address: (to be used for future annual report notification))
For further information concerning this matter, please call:	
Ann Schneider at (312)	166-3607
· · · · · · · · · · · · · · · · · · ·	Daytime Telephone Number
Registration Section F Division of Corporations Clifton Building F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314
Enclosed is a check for the following amount: \$25 Filing Fee \$30 Filing Fee \$Certificate of Status \$55 Filing Fee Certificate of Status	

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)

Name of limited liability Company as it appears State:Cabot IV - FL1M01, LLC	s on the records of the Flo	orida Department of	
Enter new principal office address, if applicable:	222 S. Riverside	e Plaza, #2000	
(Principal office address MUST BE A STREET ADDRESS)	Chicago, IL 606	06	
Enter new mailing address, if applicable: (Mailing address	c/o Ann Schneid	ler	
MAY BE A POST OFFICE BOX)	222 S. Riverside	Plaza, #2000	762 68
	Chicago, IL 606	06	CRE TO
2. The Florida document number of this limited lia	bility company is: M1	4000003985	A ISSE
3. Jurisdiction of its organization: Delaware			# 9 9
4. Date authorized to do business in Florida: 6/3	3/2014		37 33
SECTION II (5-9 complete only the applicable of	- ,		
5. New name of the limited liability company: B (must	REIT Industrial Can t contain "Limited Liabil	yon FL1M01 LLC ity Company, ""L.L.C.," o	r "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C.	naging members adopting	cting business in Florida a g the alternate name. The a	nd attach a Iternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ac	d officer address on our idress here:	records, enter the name of	the new
Name of New Registered Agent: Corporation	n Service Compa	ny	
New Registered Office Address: 1201 Hays			
Ta	Enter llahassee	Florida Street Address	11
10	City	Florida 3230	Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agenthe provisions of all statutes relative to the proper and accept the obligations of my position as registed document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this and complete performan ered agent as provided fo in the registered office a	ce of my duties, and I am for in Chapter 605, F.S. Or, ddress, I hereby confirm th	amiliar with if this

fitle/ Capacity	Name	Address	Type of Action
Itto Capacity	<u> </u>	222 S. Riverside Plaza	Type of Action
Viember	BREIT Industrial Canyon Mezz LP	Chicago, IL 60606	X Add
			Remov
4	Cabot Industrial Value Fund IV	One Beacon Street, #1700	
Member 	Operating Partnership, L.P.	Boston, MA 02108	Add
			X Remov
			15 Add
			SEE Remove
			FLORIDA
			Remove
			Add
			Remove
	a certificate, if required: no more than 90 d	ays old, evidencing the he official having custody of records in t	he

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 THAT THE SAID "CABOT IV - FL1M01,

LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"BREIT INDUSTRIAL CANYON FL1M01 LLC" ON THE NINTH DAY OF MARCH,

A.D. 2018, AT 8:19 O'CLOCK A.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.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREIT INDUSTRIAL CANYON FL1M01 LLC" WAS FORMED ON THE SIXTEENTH DAY OF APRIL, A.D. 2014.

Added to the state of the state

Authentication: 202306565

Date: 03-13-18