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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; C T CORPORATION SYSTEM

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

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Foreign Limited Liability Company CICF I - FL2B01, LLC

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12/11/2015 12:06:26 PM From: To: 8506176383(2/4)

COVER LETTER

	COVER LETTER
TO:	Registration Section Division of Corporations
SUBJI	CICF I - FL2B01, LLC
2021	Name of Limited Liability Company
The en Exister	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Fiorida," Certificate of ico, and check are submitted to register the above referenced foreign limited liability company to transact business in Fiorida
Plcaso	return all correspondence concerning this matter to the following:
	Robert Gray
	Name of Person
	Cabot Proporties, Inc.
	Firm/Company
	One Beacon Street, Suite 1700
	Address
	Boston, MA 02108
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fur	her information concerning this matter, please call;
	Mary Whelan, Paralegal, Lerner & Holmes PC 617 443-9470
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Cilifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Bnclose	d is a check for the following amount: \$\sum_\$125.00 Filing Fee \$\sum_\$130.00 Filing Fee & \$\sum_\$\$ \$

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREXIN, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CICP (- PL2B01, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (PEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 603.0904 & 605.0905, F.S. to determine penalty liability) CICF I - FL2B01, LLC, c/o Cabot Properties, Inc., One Beacon St., Suite 1700, Boston, MA 02108 (Street Address of Principal Office) CICF I - FL2B01, LLC, c/o Cabot Properties, Inc., One Beacon St., Suite 1700, Boston, MA 02108 (Malling Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation (Clty) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company 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 complywith 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. CT Corporation System (Registered ogent Joseph Tamimi Vice President 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Cabot Industrial Core Fund Operating Partnership, L.P., Member c/o Cabot Properties, Inc., One Beacon St., Suite 1700, Boston, MA 02108 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized, (If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted) Marton

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.

Charles L. Forbes

Typed or printed name of signer

Signature of an authorized person

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CICF I - FL2B01, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TENTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

SECRETAIN OF STATE
SECRETAIN OF STATE

5903128 8300 SR# 20151293727 Authentication: 10590555

Date: 12-10-15

You may verify this certificate online at corp.delaware.gov/authver.shtml