11/17/00/00/2234

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

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DEPARTMENT OF STATE

K. SALY MAR 1 7 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO. : 12000000195	
	REFERENCE : 558417 434063	5
	AUTHORIZATION : Sauld Bi	
	COST LIMIT : (\$ 130.00	
ORDER DATE :	March 16, 2017	
ORDER TIME :	3:15 PM	
ORDER NO. :	558417-015	
CUSTOMER NO:	4340636	
	FOREIGN FILINGS	
NAME:	BPREP AMERICAS GATEWAY 3&4 LLC	

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:

Registration Section

Divisi	ion of Corporation	n\$						
SUBJECT:	BPREP Americas Gateway 3&4 LLC							
JUBILET		Name of Limited Liability Company						
					ansact Business in Florida," Certificate of y company to transact business in Florida			
lease return a	ll correspondence	concerning this matter to the	following:					
	Kelli Haley							
	Name of Person							
	Jones Day							
	Firm/Company							
	2727 N. Harwood St.							
	Address ·							
	Dallas, Texas 75201							
	City/State and Zip Code							
	melissa.lang@br	ookfield.com						
	<u> </u>	E-mail address: (to be used	d for future annua	report not	tification)			
or further info	ormation concernin	g this matter, please call:						
Melis	ssa Lang		212 at (978-16				
	Name o	of Contact Person	Area Code	Day	rtime Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		of Corporations ion Section suilding centive Center Circle				
	theck for the follow 25.00 Filing Fee	ving ar fount: \$\sum_{\text{3}} \text{\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Fills Certified Copy		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy			

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: BPREP Americas Gateway 3&4 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 (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) c/o Brookfield Property Group LLC, Brookfield Place 250 Vesey Street, 15th Floor, New York, NY 10281-1023 (Street Address of Principal Office) c/o Brookfield Property Group LLC, Brookfield Place 250 Vesey Street, 15th Floor, New York, NY 10281-1023 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee , Florida 32301 (City) 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 Corporation Service Company Janet Budhu, Asst. Vice President By: (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Jay Cornforth, Manager, 250 Vescy Street, 15th Floor, New York, NY 10281-1023 Laurinda Martins, Manager, 250 Vesey Street, 15th Floor, New York, NY 10281-1023 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 oath of the translator must be submitted) 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.817.155, F.S.

Mclissa Lang, Vice President

Typed or printed name of signee

<u>Delaware</u>

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The First State

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

DELAWARE, DO HEREBY CERTIFY "BPREP AMERICAS GATEWAY 364 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 EIGHTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BPREP AMERICAS"

GATEWAY 364 LLC" WAS FORMED ON THE FIRST DAY OF MARCH, A.D. 2017.

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

2017 MAR 16 AM 7: 55

6331887 8300 SR# 20171654023 Authentication: 202158917

Date: 03-08-17