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SECRELARY OF STATE

D. SCOTT APR 5 2017 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 583386 4814233

AUTHORIZATION :

COST LIMIT : \$/160.00

ORDER DATE: April 4, 2017

ORDER TIME : 12:32 PM

ORDER NO. : 583386-005

CUSTOMER NO: 4814233

#### FOREIGN FILINGS

NAME: SOUTH FLORIDA DISTRIBUTION

CENTER BUILDING A, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

\_\_\_ PLAIN STAMPED COPY

XX \_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

### **COVER LETTER**

	istration Section sion of Corporation	ns								
SUBJECT:	SOUTH FLORIDA	DISTRIBUTION CENTER	BUILDING A, L	LC						
Name of Limited Liability Company										
The enclosed Existence, and	"Application by Ford check are submitted	reign Limited Liability Comp d to register the above refere	oany for Authoriza enced foreign limit	tion to Trai ted liability	nsact Business in Flor company to transact l	ida," Certificate of business in Florida				
Please return	all correspondence of	concerning this matter to the	following:							
	CoCo C. Math	s, Paralegal								
	* + · · + · · · · · · · · · · · · · · ·	N	ame of Person							
	Morris, Manning & Martin, LLP									
		Fi	ітп/Сотрапу							
	3343 Peachtree Road NE, suite 1600									
			Address							
	Atlanta, Georgia 30326									
		City/S	tate and Zip Code							
	cmathis@mmml	aw.com				400 📬				
For further in	formation concerning	E-mail address: (to be used g this matter, please call:	I for future annual	report noti	fication)	ECORETION TO THE				
jjon 	es@c5ip.com		404 at (	262.546 _)		R-4 M 7:51				
	Name o	of Contact Person	Area Code	Day	time Telephone Numb	per S				
Divi Regi P.O.	ILING ADDRESS: ision of Corporations istration Section Box 6327 ahassee, FL 32314			Division of Registrati Clifton Bo 2661 Exec	ADDRESS: of Corporations on Section uilding cutive Center Circle cc, FL 32301	BE 5				
	check for the follow 125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin		■ \$160.00 Filing Fe of Status & Certified					

### 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 FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

South Florida Distributi	ion Center Building A, LLC	•			
(Name of Fore	ign Limited Liability Company; mu	st include "Limited Lia	bility Company," "I	L.L.C.," or "L	LC.")
Liability Company," "L.L.C,"	ternate name adopted for the purpos	e of transacting busines	ss in Florida. The al	ternate name	must include "Limited
2. Delaware		3.			
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if	applicable)	
4.	(Date liret transacted busing	ess in Florida if prior to	negistration.)		
	(Date first transacted busing (See sections 605.0904 & 605	.0905, F.S. to determin	e penalty liability)		
5. Promenade, 1230 Peac	htree Street, NE Suite 3560				
Atlanta, GA 30309-356					
_	(Street Address of	Principal Office)			+
6. Promenade, 1230 Peach	ntree Street, NE Suite 3560				
Atlanta, GA 30309-356					, <b></b>
	(Mailing	Address)			NEC -
7. Name and street addres	s of Florida registered agent: (P	O. Box NOT accept	table)		題為工
Name:	Corporation Service Company		_		愛と同
Office Address:	1201 Hays Street				Fig. 2
	Tallahassee		Florida 32301		10 ± ±
	(City)			p code)	岩田の
Registered agent's accep Having been named as re	gistered agent and to accept ser	vice of process for th	se ahove stated lir	nited liabilit	y company at the place
designated in this applicate to complywith the provision	tion, I hereby accept the appoin ons of all statutes relative to the	tment as registered a proper and complete	igent and agree is e performance of	mv duties, a	capacity. I juriner agree ind I am familiar with and
	ny pusition as registered agent. Corporation Service Compar		<u></u>		sa Zender
	By:	"M. Tout	4>	Asst. Vi	ce President
	(Regis	tered at ent's signature)			
8. The name, title or capa	acity and address of the person(s)	) who has/have autho	rity to manage is/a	are:	
South Florida Distribution	1 Center, LLC, Manager	Timothy J. Gr	unter, Chief Exect	utive Officer	
Promenade, 1230 Peachtre	Promenade, 1	1230 Peachtree St	reet, NE Sui	te 3560	
Atlanta, GA 30309-3561		Atlanta, GA	30309-3561		
	Land Sta		gn language, a tra		
This document is executed submitted in a document to	I in accordance with section 605.  The Department of State constitution	0203 (1) (b), Florida	Statutes. I am awa	are that any f or in s.817.1	alse information 55, F.S.

Typed or printed name of signee

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SOUTH FLORIDA DISTRIBUTION CENTER

BUILDING A, 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 FOURTH DAY OF APRIL,

A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTH FLORIDAD DISTRIBUTION CENTER BUILDING A, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF MARCH, A.D. 2017.

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

T AR -4 M 7:51

Authentication: 202319724

Date: 04-04-17

6357808 8300 SR# 20172236995