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BIT JUL 14 AH 8:

J. HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 1200000019.	ACCOUNT	NO.	:	12000000019
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REFERENCE : 723206 7288091

AUTHORIZATION Comelling

COST LIMIT : \$\sqrt{125.00}

ORDER DATE: July 14, 2017

ORDER TIME : 3:07 PM

ORDER NO. : 723206-015

CUSTOMER NO: 7288091

FOREIGN FILINGS

NAME: TREA BROWARD INDUSTRIAL WESTPOINT LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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:

1. TREA Broward Industr	Limited Liability Company; must include "Lin	mited Liability Company," "L.L.C.," or "LLC.	")
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business is	n Florida. The alternate name must include "Limited L	iability Company," "L.L.C," or "LLC.")
2. Delaware		3 82-2058831	
(Jurisdiction under the law of wh	nich foreign limited hability company is organized)	(FEI mus	mber, if applicable)
4			
	(Date first transacted business in Florida, if pro (See sections 605.0904 & 605.0905, F.S. to det	or to registration.) termine penalty liability)	
5. 730 Third Avenue		6. 730 Third Avenue	7. S 29
(Street Address of Principal Office) New York		(Mailing Ad New York	idiress)
NY 10017		NY 10017	2 page
	_		SS F
Name and street address	s of Florida registered agent: (P.O. E	Box NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		語句 3
	Tallahassee	, Florida 32301 (Zip co	
	(City)	(Zip co	ode)
Having been named as re designated in this applica- to comply with the provisi	,	of process for the above stated limite at as registered agent and agree to ac per and complete performance of my	ed liability company at the place ct in this capacity. I further agree
designated in this applica to comply with the provisi and accept the obligations	tance: gistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prop to of my position as registered agent. Corporation Service Company By:	of process for the above stated limite at as registered agent and agree to acc per and complete performance of my mi speciature)	ed liability company at the place of in this capacity. I further agree of the duties, and I am familiar with Melissa Zender Asst. Vice President
Having been named as red designated in this application comply with the provision and accept the obligations 8. The name, title or capa	tance: gistered agent and to accept service ation, I hereby accept the appointment ons of all statutes relative to the project of my position as registered agent. Corporation Service Company By: (Registered agent active and address of the person(s) who	of process for the above stated limited to as registered agent and agree to accept and complete performance of my mit's guature) has/have authority to manage is/are:	ed liability company at the place ct in this capacity. I further agree y duties, and I am familiar with Melissa Zender Asst. Vice President
Having been named as redesignated in this applicate to comply with the provision and accept the obligations 8. The name, title or capa Title or Capacity:	tance: gistered agent and to accept service ation, I hereby accept the appointment ons of all statutes relative to the project of my position as registered agent. Corporation Service Company By: (Registered agent acity and address of the person(s) who Name and Address: 730 Third Avenue New York	of process for the above stated limited to as registered agent and agree to accept and complete performance of my mit's guature) has/have authority to manage is/are:	ed liability company at the place ct in this capacity. I further agree y duties, and I am familiar with Melissa Zender Asst. Vice President
Having been named as redesignated in this application comply with the provisional accept the obligations 8. The name, title or capa Title or Capacity: Please see attached.	tance: gistered agent and to accept service ation, I hereby accept the appointment ons of all statutes relative to the project of my position as registered agent. Corporation Service Company By: (Registered agent active and address of the person(s) who are and Address: 730 Third Avenue New York NY 10017	of process for the above stated limited to as registered agent and agree to accept and complete performance of my mit's guature) has/have authority to manage is/are:	ed liability company at the place ct in this capacity. I further agree y duties, and I am familiar with Melissa Zender Asst. Vice President
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Having been named as redesignated in this application comply with the provisional accept the obligations. 8. The name, title or capatitle or Capacity: Please see attached. (Use attachments if necessing the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the translator must be sufficient in the second of the	tance: gistered agent and to accept service ation, I hereby accept the appointment ons of all statutes relative to the property of my position as registered agent. Corporation Service Company By: (Registered agent and Address of the person(s) who Name and Address: 730 Third Avenue New York NY 10017 sary) of existence, no more than 90 days of which it is organized. (If the certification in accordance with section 605.0)	of process for the above stated limited as registered agent and agree to accept and complete performance of my mi's squature) to has/have authority to manage is/are: Title or Capacity: Id, duly authenticated by the official he cate is in a foreign language, a translated to the capacity of the cate is in a foreign language.	ed liability company at the place of in this capacity. I further agree by duties, and I am familiar with Melissa Zender Asst. Vice President Name and Address: having custody of records in the ation of the certificate under oath are that any false information

Typed or printed name of signee

Donna Cohen, Assistant Secretary

First Name	Middle Name	Last Name	Title
Kristen		Doscher	Assistant Secretary
Brian	Р.	Eby	Authorized Signer
Michael	D	Fisk	Authorized Signer
Kathleen	Н	Fitzgerald	Controller
Samuel	Р.	Flood	Authorized Signer
Vadim		Goland	Authorized Signer
Anthony	L	Grimaldi	Assistant Secretary
Jorge		Gutierrez	Treasurer
Duane	С	Hale	Authorized Signer
Alexander	E.	Hancock	Authorized Signer
William	С	Harrison	Authorized Signer
Wendell		Hill	Authorized Signer
Harrison		Hunt	Assistant Secretary
Jamin	R.	Jenkins	Assistant Secretary
Jillian	E.	Joseph	Assistant Secretary
Richard	М	Kimble	Authorized Signer 2. Vice President 92.
Timothy		Leaycraft	Vice President
R	Craig	Lord	Authorized Signer
Gerald	P.	McCarthy	Vice President 5
Heather	М	McCormack	Authorized Signer
Gordon	Christopher	McGibbon	Vice President
Nancy		Miller	Assistant Secretary
William		Miller	Assistant Secretary
Robert	E	Niendorf	Authorized Signer

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First Name	Middle Name	Last Name	Title
Ted	C.	Norman	Authorized Signer
Patrick		O'Reilly	Authorized Signer
David		Otte	Authorized Signer
Kimberly		Owens	Assistant Secretary
Jason	К	Palmer	Authorized Signer
Laura	Mindy	Palombo	Authorized Signer
Marjorie		Pierre-Merritt	Secretary
Lynette	M.	Pineda	Authorized Signer
Wende		Pogust	Authorized Signer
John	R	Ragland	Authorized Signer
Robert	J	Redican	Authorized Signer
Todd	Howard	Rollins	Authorized Signer
Michael		Schwaab	Authorized Signer
Terry		Senger	Authorized Signer
Gary	V	Simonetti	Authorized Signer
Brad	Е	Simpkins	Authorized Signer
Jennifer		Sisom	Assistant Treasurer
Abigail		Smith	Assistant Secretary (7)
Emily	M.	Smith	Authorized Signer
Kevin	J	Smith	Authorized Signer
Erik	J	Sobek	Authorized Signer
Gabriel	J	Steffens	Assistant Secretary
Lauren	G.	Stokes	Authorized Signer
Cherita		Thomas	Assistant Secretary

First Name	Middle Name	Last Name	Title
Scott		Trafford	Authorized Signer
Carly		Tripp	Authorized Signer
Steven	N	Viole	Authorized Signer
Sheryl		Waldorf	Authorized Signer
Francesca		Weindling	Assistant Secretary
Pamela	M	West	Authorized Signer
Laurie	E.	Williams	Authorized Signer

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SECRETARY OF STATE
FALLAHASSEE FLOAIDA

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TREA BROWARD INDUSTRIAL WESTPOINT 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 FOURTEENTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREA BROWARD INDUSTRIAL WESTPOINT LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JUNE, A.D. 2017.

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

Authentication: 202886432

Date: 07-14-17

6461512 8300 SR# 20175242852