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| (Requ | iestor's Name) | | | | |
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| (City/s | State/Zip/Phone | e #) | | | |
| PICK-UP | MAIT | MAIL | | | |
| (Busir | ness Entity Nan | ne) | | | |
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| Certified Copies | Certificates | of Status | | | |
| Special Instructions to Fil | ling Officer: | | | | |
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Office Use Only



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18 FEB 16 AM II: 13

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 073872 4312431

AUTHORIZATION : Symbolic

COST LIMIT : \$460-60

ORDER DATE: February 15, 2018

ORDER TIME : 10:07 AM

ORDER NO. : 073872-030

CUSTOMER NO: 4312431

FOREIGN FILINGS

NAME: LAKESIDE IV AND V ASSOCIATES,

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: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

| TO: | Registration Division of | n Section Corporations | | | | | | |
|----------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------------|-------------|-----------------------------------------------------------------------------------|--|--|
| SUBJE | | ide IV and \ | V Associates, LLC | | | | | |
| | .,,,,, | Name of Limited Liability Company | | | | | | |
| | | | | | | nsact Business in Florida," Certificate of company to transact business in Florid | | |
| Please r | eturn all corre | spondence co | ncerning this matter to the f | ollowing: | | | | |
| | Ric | chard B. Fried | | | | | | |
| | | Name of Person | | | | | | |
| | c/o | c/o Maritime Management, LLC | | | | | | |
| | | | Fir | m/Company | | | | |
| | On | One Maritime Plaza, Suite 2100 | | | | | | |
| | Address | | | | | | | |
| | Sar | San Francisco, California 94111 | | | | | | |
| | City/State and Zip Code | | | | | | | |
| | jmill | ing@farallone | capital.com | | | | | |
| | | | E-mail address: (to be used | for future annual | report noti | fication) | | |
| For furt | ner informatio | on concerning | this matter, please call: | | | | | |
| | Richard B. | Fried | | 415 | 421-21 | 51 | | |
| | | Name of | Contact Person | Area Code | Dayt | ime 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 on Section uilding cutive Center Circle | | | | |
| Enclose | d is a check fo □ \$125.00 F | or the followin Filing Fee | ng amount: \$\sum \\$130.00 \text{ Filing Fee & Certificate of Status} | ☐ \$155.00 Filin Certified Copy | g Fee & | ■ \$160.00 Filing Fee, Certificate of Status & Certified Copy | | |

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. Lakeside IV and V (Name of Foreign | Associates, LLC Limited Liability Company, must include "Limite | ed Liability Co | npany," "L.L.C.," or "LLC.") | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|--------------------------------------------------------|--|--|--|
| (If name unavailable, enter alternate is | nume adopted for the purpose of transacting business in Flu | rida. The alternat | e name wast include "Limited Liah | ritiry Company " "1. I. C " or "1.1 C ") | | | |
| Delaware | | | | y co | | | |
| ė. | uch foreign limited liability company is organized) | 3 | (FEI numb | er, if applicable) | | | |
| 4 Upon registration | | | | | | | |
| 4. Open registration | (Date first transacted business in Florida, if prior to | registration.) | - A | | | | |
| 5 One Maritime Plaza, S | (See sections 605,0904 & 605,0905, F.S. to determ | | • | 2100 | | | |
| 5. One Mantime Plaza, S' (Street Address of P | | 6. <u>On</u> | One Maritime Plaza, Suite 2100 (Mailing Address) | | | | |
| San Francisco, California 94111 | | Sar | San Francisco, California 94111 | | | | |
| 7. Name and street addres | s of Florida registered agent: (P.O. Box | NOT acce | ptable) | | | | |
| Name: | Corporation Service Company | | | | | | |
| Office Address: | 1201 Hays Street | | | | | | |
| | Tallahassee | | , Florida 32301 (Zip code | | | | |
| Registered agent's accept | (City) | | (Zip code | -) | | | |
| | Gof my position as registered agent. Corporation betwee Company (Registered agent s acity and address of the person(s) who have | | ority to manage is/are: | Roxanne Turner Asst. Vice President Name and Address: | | | |
| See A | ttachment A | | | | | | |
| | | | | | | | |
| (Use attachments if necess | sary) | | | | | | |
| jurisdiction under the law of the translator must be sulf. 10. This document is exect | of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605.020, the Department of State constitutes a th | e is in a fore 3 (1 <u>) (b),</u> Flo | eign language, a translati orida Statutes, I am awar | ion of the certificate under oath | | | |
| The state of the s | 1/ | , a degree N | some as provided for in | 5.0 (7.1 5 5 (1 .55. | | | |
| | Signiture | of an authorized | person | ···········. | | | |
| | Dish | ard B. Fried | ı | | | | |
| | | printed name of | | | | | |

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

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Name and Address

Richard B. Fried c/o Maritime Management, LLC One Maritime Plaza, Suite 2100 San Francisco, California 94111

Title or Capacity

Authorized signatory of Maritime Management, LLC, manager of Jacksonville NR Investors, LLC, managing member of Jacksonville NR Associates, LLC, sole member of Jacksonville NR Mezzanine, LLC, sole member of the applicant

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LAKESIDE IV AND V ASSOCIATES, 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 THIRTEENTH DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAKESIDE IV AND V ASSOCIATES, LLC" WAS FORMED ON THE NINTH DAY OF FEBRUARY, A.D. 2018.

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

Authentication: 202146315

Date: 02-13-18