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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 292997 AUTHORIZATION : COST LIMIT : \$ 160.00 ORDER DATE: July 10, 2018 ORDER TIME : 3:05 PM ORDER NO. : 292997-175 CUSTOMER NO: 4302815 FOREIGN FILINGS NAME: NNN OWNER GP II LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY ____ PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

COVER LETTER

Registration Section

TO:

Div	ision of Corporation	s				
SUBJECT:	NNN Owner GP II L	LC				
OODODE I.		Name of L	imited Liability Co	ompany		
The enclosed Existence, ar	l "Application by Fore and check are submitted	eign Limited Liability Comp I to register the above refere	any for Authorizati nced foreign limite	ion to Trai d liability	nsact Business in Florida," C company to transact busines	Certificate of ss in Florida.
Please return	all correspondence c	oncerning this matter to the	following:			
	c/o Apollo Glot	oal Management, LLC				
		Na	me of Person			
	NNN Owner GI	PHLLC				
		Fir	m/Company			
	9 West 57th Str	eet				
			Address			
	New York, NY	10019				
		City/St	ate and Zip Code			
	<u></u>	E-mail address: (to be used	for future annual	report noti	fication)	
For further i	nformation concerning	g this matter, please call:				
			at ()		
	Name o	f Contact Person	Area Code	Dayı	time Telephone Number	
Div Rej P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 llahassee, FL 32314			Division of Registrati Clifton Bo 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	a check for the follow \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	g Fee &	■ \$160.00 Filing Fee, Cer 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 FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alternate r 5. Delaware			1 1 3 Co. C			
. Delaware	ame adopted for the purpose of transacting business in Flor	eda. The afternate name must include "Limited	Liability Company, LLLC, or LLC.			
	high foreign limited liability company is organized)	3(Film	sumber, if applicable)			
	(Date first transacted business in Florida, if prior to	registration.)				
	(See sections 605 0904 & 605,0905, F.S. to determi	ine penalty liability)	. 11.0			
. c/o Apollo Global Ma (Sneet Address of	nagement, LLC	6. c/o Apollo Global Mana	Address)			
9 West 57th Street	, , , , , , , , , , , , , , , , , , , ,	9 West 57th Street				
New York, NY 10019		New York, NY 10019				
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)				
Name:	Corporation Service Company					
Office Address:	1201 Hays Street	····-				
	Tallahassee	Florida 32301				
	(City)	(Zip	code)			
Taving been named as re designated in this applica o comply with the provis	tance: egistered agent and to accept service of parties, I hereby accept the appointment actions of all statutes relative to the proper s of my position as registered agent, Corporation Service Company By:	s registered agent and agree to o	act in this capacity. I further agre			
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap	egistered agent and to accept service of partion, I hereby accept the appointment actions of all statutes relative to the proper s of my position as registered agent. Corporation Service Company By: (Registered agent's active and address of the person(s) who have	s registered agent and agree to a and complete performance of no signature)	act in this capacity. I further agroup duties, and I am familiar with Roxanne Turner Asst. Vice President			
Having been named as re- designated in this applica- to comply with the provis- and accept the obligation	egistered agent and to accept service of partion, I hereby accept the appointment actions of all statutes relative to the proper s of my position as registered agent. Corporation Service Company By: (Registered agent's	s registered agent and agree to a and complete performance of n	act in this capacity. I further agroup duties, and I am familiar with Roxanne Turner Asst. Vice President			
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Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap Title or Capacity: Authorized Signator	egistered agent and to accept service of pation, I hereby accept the appointment actions of all statutes relative to the proper s of my position as registered agent. Corporation Service Company By: (Registered agent's active and address of the person(s) who has a Name and Address: y John Lipsey c/o Apollo Global Mgmt 9 W. 57th St., NY, NY 10019	s registered agent and agree to a and complete performance of no signature) as/have authority to manage is/ara Title or Capacity:	act in this capacity. I further agroup duties, and I am familiar with Roxanne Turner Asst. Vice President			
designated in this applicate comply with the provisand accept the obligation 8. The name, title or cap Title or Capacity: Authorized Signator (Use attachments if neces 9. Attached is a certificate jurisdiction under the law of the translator must be s 10. This document is exec	gistered agent and to accept service of pation, I hereby accept the appointment actions of all statutes relative to the proper sof my position as registered agent. Corporation service Company By: (Registered agent's acity and address of the person(s) who have and Address: John Lipsey c/o Apollo Global Mgmt 9 W. 57th St., NY, NY 10019 ssary) c of existence, no more than 90 days old, of which it is organized. (If the certificat	s registered agent and agree to a and complete performance of resignature) as/have authority to manage is/are Title or Capacity: duly authenticated by the official te is in a foreign language, a trans	I having custody of records in the slation of the certificate under oath			

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "NNN OWNER GP II 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 TWELFTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NNN OWNER GP II LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF MAY, A.D. 2018.

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

Add of the state o

Authentication: 203053386

Date: 07-12-18