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								ansact Business in Florida," y y company to transact busine	
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	CHARLES M. STOREY					617	305-61-	•	
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MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FI. 32314						STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						\$155.00 Fili rtified Copy		☐ \$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 6/51/002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN, LIMITED LIARILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CIVF V - FL1W02-W04, LLC (Name of Foreign Lamited 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 "LUC") 2 DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) OCTOBER 15, 2018 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penelty liability) 6 C/O CABOT INDUSTRIAL VALUE FUND* C/O CABOT INDUSTRIAL VALUE FUND* (Street Address of Principal Office) (Mailing Address) ONE BEACON STREET, 17TH FLOOR ONE BEACON STREET, 171H FLOOR BOSTON, MA 02108 BOSTON, MA 02108 *OPERATING PARTNERSHIP, L.P. 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT CORPORATION SYSTEM Name: 1200 SOUTH PINE ISLAND ROAD Office Address: **PLANTATION** , Florida 33324 (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 comply with 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.

Bree Zahner Assistant Secretary (Registered agent's signstanc) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: MEMBER CABOT INDUSTRIAL VALUE FUND V OPERATING PARTNERSHIP, L.P. C/O CABOT PROPERTIES, INC. ONE BEACON STREET, 17TH FLOOR BOSTON, MA 02108 (Use attachments if necessary) 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) 10. This document is executed in accordance with section 695.0203 (1) (b): Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellow as provided for in s.817.155, F.S.

CABOT INDUSTRIAL VALUE FUND V OPERATING PARTNERSHIP, L.P., ITS

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SOLE MEMBER, BY CHARLES M. STOREY, VICE PRESIDENT - INVESTMENTS

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CIVF V - FL1W02-W04, 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 SECOND DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CIVF V - FL1W02-W04, LLC" WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2018.

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



7081999 8300 SR# 20186936561

Authentication: 203531484

Date: 10-02-18