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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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18 DEC 27 PH 4: 2:

K. SALY DEC 28 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 560464 8152357
AUTHORIZATION: Spress Cleracy
COST LIMIT : \$ 125.00
ORDER DATE : December 27, 2018
ORDER TIME : 2:47 PM
ORDER NO. : 560464-050
CUSTOMER NO: 8152357
FOREIGN FILINGS
NAME: BREIT MF SEA HARBOR LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Emily Croft -- EXT# 62925

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	BREIT MF Sea Ha	rbor LLC				
		Name of	Limited Liability	Company		
The enclosed Existence, as	d "Application by Fo nd check are submitte	reign Limited Liability Comped to register the above refer	pany for Authoriza enced foreign limi	ation to Tr ted liabilit	ansact Business in Florida," Coy y company to transact business	ertificate of s in Florida.
Please return	all correspondence	concerning this matter to the	following:			
	Joseph Valane					
		N	ame of Person			
	Revantage Cor	porate Services				
		Fi	irm/Company			
	Two Liberty P	lace, 50 South 16th Street, S	uite 3325			
			Address			
	Philadelphia, F	A 191 0 2				
		City/S	tate and Zip Code		 	
	jvalane@revanta	ge.com				
		E-mail address: (to be used	d for future annual	report no	tification)	
For further in	nformation concerning	g this matter, please call:				
Jos	eph Valane		215 at (330-42	21	
	Name o	of Contact Person	Area Code	Day	time Telephone Number	
Div Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section duilding ecutive Center Circle see, FL 32301	
	check for the follow 125.00 Filing Fee	ing amount: \$\Bigcup \text{\$\sum \$\sum \text{\$\sum \$\sum \text{\$\sum \$\text{\$\sum \$\text{\$\$}\ext{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\}\exitt{\$\text{\$\text{\$\}\$}}}\$}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certified Status & Certified Copy	ficate

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:

222 South Riverside P	hich foreign limited liability company is organized)	3.	0. 0.00/401	
222 South Riverside P			81-3506451	
			(FEI ma	mber, if applicable)
	(Date first transacted business in Florida, if prio (See sections 605,0904 & 605,0905, F.S. to dete	r to registration emnine penalty	L) biability)	·
	laza, Suite 2000	6	222 South Riverside Plaz	a, Suite 2000
•	Principal Office)	٠.	(Mailing Ad	
Chicago, IL 60606			Chicago, IL 60606	
				1,
				\$. ·
Name and street addre-	ss of Florida registered agent: (P.O. B	lox <u>NOT</u> a	acceptable)	Ţ.
Name:	Corporation Service Company			ا من معاد
	1201 Hays Street			
Office Address:	1201 Hays Succi			
	Tallahassee		, Florida <u>32301</u>	7
ving been named as re ignated in this applica comply with the provis	stance: egistered agent and to accept service of ution, I hereby accept the appointmen ions of all statutes relative to the prop s of my position as registered agent. Corporation Service Company By:	it as registe	ered agent and agree to ac mplete performance of my Emily	of in this capacity. I fur or duties, and I am family Croft
aving been named as resignated in this application comply with the provised accept the obligation. The name, title or capitation of the c	egistered agent and to accept service of ation, I hereby accept the appointmentions of all statutes relative to the propers of my position as registered agent. Corporation Service company By: **Reputation accept the person(s) who	of as registed per and control of the signandre) has/have a	ered agent and agree to acomplete performance of my Emily ASST. Victority to manage is/are:	of in this capacity. I fur of duties, and I am family Y Croft President
aving been named as resignated in this applica comply with the provis d accept the obligation	egistered agent and to accept service of ation, I hereby accept the appointmentions of all statutes relative to the property of my position as registered agent. Corporation Service Company By: Registered agent Registered agent Registered agent Acceptable agent Registered agent Registered agent Acceptable age	at as registed per and control signature) has/have a	ered agent and agree to ac mplete performance of my Emily Asst. Vice	of in this capacity. I fur or duties, and I am family Croft
iving been named as resignated in this application comply with the provision accept the obligation. The name, title or capitation	egistered agent and to accept service of the appointment ions of all statutes relative to the property of my position as registered agent. Corporation Service company By: Acceptaged agent of the person of the p	of as registed per and control signature) this signature) that have a Ti	ered agent and agree to acomplete performance of my Emily ASST. Victority to manage is/are:	of in this capacity. I fur of duties, and I am family Y Croft President
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ving been named as resignated in this applicationally with the provised accept the obligation The name, title or capa	egistered agent and to accept service of all statutes relative to the propies of my position as registered agent. Corporation Service Company By: Accept and address of the person(s) who Name and Address: BREIT MF Roman Holding 222 South Riverside Plaza, Chicago, IL 60606	of as registed per and control signature) this signature) that have a Ti	ered agent and agree to acomplete performance of my Emily ASST. Victority to manage is/are:	of in this capacity. I fur of duties, and I am family Y Croft President

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BREIT MF SEA HARBOR LLC" IS DULY

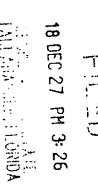
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREIT MF SEA HARBOR LLC" WAS FORMED ON THE THIRTEENTH DAY OF DECEMBER, A.D. 2018.

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





Authentication: 204184947

Date: 12-27-18

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