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March 5, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORP

SUBJECT: CPI CITRUS PARK TRS, L.L.C.

REF: W19000021257

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Octavia L Simmons Regulatory Specialist III FAX Aud. #: H19000072957 Letter Number: 919A00004479

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED ITABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA-CPI Citrus Park TRS, L.L.C. (Name of Foreign Limited Liability Company, must mehide "Limited Liability Company," "LLC.," or "L.C.") (If name unavailable, only alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Computy," "L.L.C," or "LLC.") 2. Delaware applied for (Jarada and make the law of which foreign limited hability company is organized) (FEI rember, l'applicable) 4. Upon qualification (Date first transacted business in Florida, if prior in registration.) (See sections 605,0904 & 605,0905, F.S. to determine permity ushilly) 1001 Pennsylvania Ave NW 6. 1001 Pennsylvania Ave NW (Stront Arbitest of Principal (Office) Suite 220 South Suite 220 South Washington DC 20004 Washington DC 20004 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation (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. Angel Shearer CT Corporation System By: Assistant Secretary (Regimered agent's vigrunure) 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: Sole Member Carlyle Property Investors (Master REIT), L.L.C. 001 Pennsylvania Ave NW ashington DC 20004 (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 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Signature of an authorized person Stucy M. Rosenthal Typed or printed name of signer

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CPI CITRUS PARK TRS, L.L.C." 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 FOURTH DAY OF MARCH, A.D. 2019.

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

19 MAR - 4 AM 2: 28
SECHELY TO SEE STATE
AND SEE FLORIDA

7304021 8300

SR# 20191725420

You may verify this certificate online at corp.delaware.gov/authver.shtml

Justiney VI. Biolincia, Socretary of State

Authentication: 202363944

Date: 03-04-19