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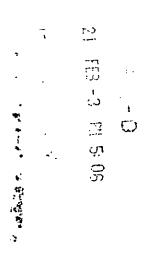
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## **COVER LETTER**

TO:

Registration Section

SUBJECT:	Westlake 24 Industrial Venture LLC Nam	e of Limited Liability Company				
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.				
Please return	all correspondence concerning this matter t	o the following:				
	Patrick Harrington					
	Name of Person					
	Harrington Law LLC					
	Firm/Company 201 W Springfield Ave, Suite 601					
		Address				
	Champaign, IL 61820					
		City/State and Zip Code				
	tvallee@becknellindustrial.com					
	E-mail address: (to be	e used for future annual report notification)				
For further is	nformation concerning this matter, please ca	11:				
Tar	mmy Vallee	217 352-4167 at ( )				
	Name of Contact Person	Area Code Daytime Telephone Number				
Mailing Address: Registration Section		Street Address: Registration Section				
Division of Corporations		Division of Corporations				
	D. Box 6327 Ilahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Ple	closed is a check for the following amount: ase make check payable to: FLORIDA DEI \$125.00 Filing Fee  Certificate	te & 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate				

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

IN COMPLIANCE WITH SECTION 6/15,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. Westlake 24 Industrial	Venture LLC				
(Name of Foreign	Limited Liability Company; must include "Limited	Liability Comp	pany," "L.L.C.," or "LLC.")		
f name unavailable, enter alternate r	name adopted for the purpose of transacting business in Fl	orida. The alternate	name must include "Limited L	isbility Comp	any," "L.L.C." or "L.L
Delaware		3			
(Jurisdiction under the law of which foreign limited liability company is organized)		3. (FEI number, if applicable)			ole)
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration ) ne penalty liability	·)		
2750 E 146th Street			E 146th Street		
Street Address of Principal Office)	<del></del>	6	(Mailing Address)		
Suite 200		Suite	200		
Carmel, IN 46033		Carm	nel, IN 46033	ı,	752
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT accept	(able)		7.77 7.77 7.77
					 نی
	Corporation Service Company				;
Name:			_		
Office Address:	1201 Hays St				ά.
	<u> </u>		_	-	R
	Tallahasse		32301		
	(City)		, Florida (Zip code)		

## 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.

Alsya Smith Aleya Smith, Assistant Secretary
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Joseph A. Versaggi	□Manager	Name: Richard P. Leeret
□Member	Address: c/o Washington Capital Mgmt	□Member	Address: c/o Washington Capital Mgmt
<b>≅</b> Authorized	260 Franklin St., Suite 1900	<b>■</b> Authorized	260 Franklin Street, Suite 1900
Person	Boston, MA 02110	Person	Boston, MA 02110
□Other	Other	Other	□Other
□Manager	Name: Robert M. Kovecs	□Manager	Name: Daniel G. Harrington
□Member	Address: c/o Washington Capital Mgmt	□Member	Address: 1040 Del Haven #2E
<b>■</b> Authorized	1200 Sixth Ave., Ste 700	☑ Authorized	Delray Beach, FL 33483
Person	Seattle, WA 98101	Person	
□Other	□Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□ Other	□Other
Attached is a cert risdiction under the the translator must This document:	ise an attachment to report more than six (6) may be added to the index when filing your ifficate of existence, no more than 90 days one law of which it is organized. (If the certificate be submitted)  is executed in accordance with section 605.0 ment to the Department of State constitutes a	Florida Department of State Id, duly authenticated by the icate is in a foreign language 0203 (1) (b), Florida Statutes.	Annual Report form.  official having custody of records in the a translation of the certificate under oath.  I am aware that any false information
	<u>Daniel</u>	6. Harringto	

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

DELAWARE, DO HEREBY CERTIFY "WESTLAKE 24 INDUSTRIAL VENTURE 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 JANUARY, A.D. 2021.

4890849 8300 SR# 20210244146

Authentication: 202386562

Date: 01-27-21

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