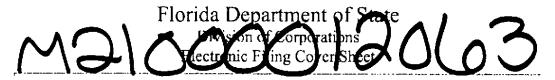
8/23/2021

Division of Corporations



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(((H21000315236 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (514)280-3338 Fax Number : (954)208-0845

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Foreign Limited Liability Company BDPF RETAIL HOLDCO REIT LLC

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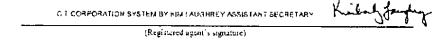
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTEN THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSPICT BUSINESS. IN THE STATE OF FLORIDA:

1. BOPF Retail Holdco R	EIT LLC Limited Liability Company; must include "Limited	Linkilla Campania W. L. C.			
(Name at Friedge	continue than by Conquiny, mass mentice Partition	casonity Company 1.4.7 , or 1.1 C. I			
(II) name unavailable, enter altoinate	name adopted for the purpose of bansacting business in El	rida. The alternate name most include "functed t	adolity Company," "L.L.C.; or "LLC")		
Delayvare 2		3. <u>87-1466266</u>	her, il applicable)		
June 30, 2021					
	(Date first transacted business in Planda of prior to 1 See sections 603-6904 & COS 0905, P.S. to determine	gisti (1910.) e penaliy liabibiy)	······································		
6/0 NewTower Trust Company 5. (Street Address of Panoipal Ottice)		6. (Mailing Address)			
7315 Wisconsin Avenue, State 350W		•	7315 Wisconsin Avenue, Suite 350W		
Bethesda, MD 20814		Bethesda, MD 20814			
7. Name and street addre	ss of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)	R021 SE/		
Name:	C T Corporation System				
Office Address:	1200 South Pine Island Road		<i>i</i> ИИ: 30		
	Plantation	. Florida	30		
	(Cay)	(Ap 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.



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: Robert B. Edwards	II Manager	Name. Amy Price
□Ntember	Address:C/o NewTower Trust Company	□ Member	c/o BentallGreenOak
□Authorized	7315 Wisconsin Avenue, Suite 350W	□ Authorized	600 California Street, Suite 560
Person	Bethesda, MD 20814	Person	San Francisco, CA 94108
President Souther	□ Other	■OtherOther	ent DOther
□Manager	Name: _Tim Bolla	□ Manager	Name: <u>Mark Reinikka</u>
□Member	Address: c/o BentallGreenOak	□Member	Address: e/o BentallGreenOak
□Authorized	7315 Wisconsin Avenue, Suite 200W	_Authorized	1201 Third Avenue, Suite 3000
Person	Bethesda, MD 20814	Person	Seattle, WA 98101
■ Other <u>Vice Presid</u>	entOther	Other Vice Presid	e <u>nt</u> [Other]
□Manager	Name: Jamie McCue	□Manager	Name: Alonia Carey
□Member	Address: <u>c/o BentallGreenOak</u>	_Member	Address: <u>c/o BentallGreenQak</u>
□Authorized	(20) Third Avenue, Suite 3000	Authorized	399 Park Ave., Floor 18
Person	Seattle, WA 98101	Person	New York, NY 10022
Other Vice Presi	dentOther	Other Si Director	Tax Other

Important Notice. Use an attachment to report more than six (6). The attachment will be imaged for reporting nurposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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 outh 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 fellow as provided for in \$817,155, F.S.

HU0Q		
	Signature of an authorized person	
Robert B. Edwards		
	Typed or printed name of signee	-



Page 1

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

DELAWARE, DO HEREBY CERTIFY "BDPF RETAIL HOLDCO REIT 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 TWENTIETH DAY OF AUGUST, A.D. 2021.

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

Authentication: 203976238

Date: 08-20-21