1421000013094

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Y SULKER FEB 0 8 2012 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 461936 8237458				
AUTHORIZATION: Spelle na				
COST LIMIT : \$ 25:00				
ORDER DATE : February 7, 2022				
ORDER TIME : 10:32 AM				
ORDER NO. : 461936-030				
CUSTOMER NO: 8237458				
**				
FOREIGN FILINGS				
NAME: EXETER 815 SOUTH 56TH GP, LLC				
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY				
XXXX AMENDMENT				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	rs on the records of the Florida D	epartment of	
State: Exeter 815 South 56th GP, LLC	_		
Enter new principal office address, if applicable:			
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable:	Five Radnor Corporate Cente	<u>r </u>	
(<u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>)	100 Matsonford Road, Suite 250		
	Radnor, PA 19087		
2. The Florida document number of this limited lia	ability company is: M210000130)94 <u>- المنطقة</u> المنطقة	
3. Jurisdiction of its organization: Delaware		<u> </u>	
4. Date authorized to do business in Florida: 10/0	05/2021 	<u>。</u>	
SECTION II (5-9 complete only the applicable		المالية المالية	
5. New name of the limited liability company: (mus	st contain "Limited Liability Con	ipany, ""L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	naging members adopting the alt	usiness in Florida and attach a ernate name. The alternate name	
6. If amending the registered agent and/or registere registered agent and/or the new registered office a	ed officer address on our records. ddress here:	enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Fotor Florida	Street Address	
	Enter Prortaci		
_	City	, Florida Zip Code	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ages the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of th	nt and agree to act in this capaci and complete performance of my tered agent as provided for in Ch in the registered office address,	duties, and I am familiar with apter 605, F.S. Or, if this	

If Changing Registered Agent, Signature of New Registered Agent

Title/ Capacity	Name	Address	Type of Action
Authorized Person	J. Peter Lloyd	EQT Exeter Five Radnor Corporate Center 100 Matsonford Road, Suite 250 Radnor, PA 19087	<u>Type of Action</u>
		EQT Exeter	□Remo
Authorized Person	Jason Borrelli	Five Radnor Corporate Center 100 Matsonford Road, Suite 250 Radnor, PA 19087	= Add
			□Remov
Authorized Person	Jason Honesty	EQT Exeter Five Radnor Corporate Center 100 Matsonford Road, Suite 250 Radnor, PA 19087	= Add
			□Remov
Authorized Person	Brian Fogarty	EQT Exeter Five Radnor Corporate Center 100 Matsonford Road, Suite 250 Radnor, PA 19087	= Add
		□Remov	
			□Add
aforemention		than 90 days old, evidencing the cated by the official having custody of records in the	□Remov

Filing Fee: \$25.00