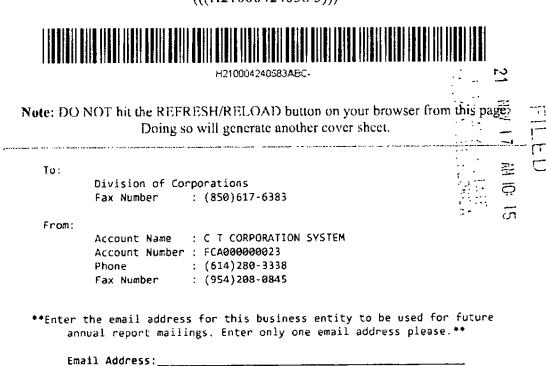


Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Foreign Limited Liability Company **USVI 405 Lionel Way LLC**

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From: Kalty Toon

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

USVI 405 Lionel Way	$\Box \Box C$			
(Name of Foreign	Limited Cability Company; must include "Uninted I	ushibity Company, "L.L.C.," or "LLC.,"		
name unavailable, enter alternate t	name adopted for the purpose of transacting business in Elon	da. The alternate name must include "Lingted Lisb	thty Company,""L	LC, "or "LLC.")
Delaware		3		
(Jurisdiction under the law of w	hich foruga (imited liability company is organized)	3. (FH masser,	if applicable i	
				
	(Date first transacted business in Florida, if prior to re (See sections 605 000); £ 605 0005; F.S. to determine	gistration.) ponalty hability)	<u> </u>	2
2 Scaport Lane, 15th F	Hoor	2 Scapart Lane, 15th Floor 6. (Mailing Address)		<u> </u>
Boston, MA 92210		Boston, MA 02210		II E
c/o AEW Capital Man	agement, L.P.	e/o AEW Capital Managemer	nt, L.E. 1	≩ ∃
. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)		
. Name and <u>street addres</u> Name:	88 of Florida registered agent: (P.O. Box C T Corporation System	NOT acceptable)		
		<u>NOT</u> acceptable) 		
Name:	C T Corporation System	33324		
Name:	C T Corporation System 1200 South Pine Island Road	NOT acceptable) 33324 Florida (Zip tode)		
Name: Office Address: degistered agent's acceptaving been named as reasignated in this application comply with the provis	C T Corporation System 1200 South Pine Island Road Plantation (Coy)	. Florida	this capacity ties, and I un	v. I further as
Name: Office Address: Registered agent's acceptaving been named as resignated in this application occumply with the provisand accept the obligation	C T Corporation System 1200 South Pine Island Road Plantation (Cey) Stance: registered agent and to accept service of pration, I hereby accept the appointment as ions of all statutes relative to the proper of	. Florida	this capacity ties, and I un	v. I further as

Page: 4 of 6

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:James J. Finnegan	≟ Manager	Name: Carrie A. Bellerby
□Membei	Address: e/o AEW Capital Management,	⊒Member	Address: c/o AEW Capital Management.
∄Authorized	2 Scaport Lanc, 15th Floor		2 Scaport Lane, 15th Floor
Person	Boston, MA 02210	Person	Boston, MA 02210
COther	Other	Other	Other
∐Manager	Name: Seth E. Berger	∐ Manager	Name: Michael P. Byrne
□Member	Address: e/o AEW Capital Management.	Member	Address: c/o AEW Capital Management.
☑. Authorized	2 Scaport Lane, 15th Floor	₹ Authorized	2 Scaport Lane, 15th Floor
Person	Boston, MA 02210	Person	Boston, MA 02210
□Other	□Other	Other	Other
Manager	Name:	□Manager	Name: Sara Cassidy
□Member	Address:AEW Capital Management,	I Member	Address:AEW_Capital Management.
 ■ Authorized	2 Seaport Lane, 15th Floor		2 Seaport Lane, 15th Floor
Person	Boston, MA 02210	Person	Boston, MA 02210
Other	□Other	Other	

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

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.

Fin W. Stallet		
	Sign dure of a authorized person	
Eric Skeffington		
	Visit Annual State Annual State of Court	

^{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)

AUTHORIZED PERSONS

Jon E. Martin. Authorized Person e/o AEW Capital Management, L.P. Two Seaport Lane, 15th Floor Boston, MA 02210

Thomas E. Mullahey, Authorized Person e/o AEW Capital Management, L.P. Two Seaport Lane, 15th Floor Boston, MA 02210

Mark A. Morrison, Authorized Person c/o AEW Capital Management, L.P. Two Scaport Lane, 15th Floor Boston, MA 02210

Neal K. Sharma e/o AEW Capital Management, L.P. Two Seaport Lane, 15th Floor Boston, MA 02210

Dana C. Spires e/o AEW Capital Management, L.P. Two Scaport Lane, 15th Floor Boston, MA 02210

Eric Skeffington e/o DLA Piper LLP (US) 33 Arch Street, 26th Floor Boston, MA 02110



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "USVI 405 LIONEL WAY 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2021.

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

Authentication: 204705300

Date: 11-16-21