

M21000016151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

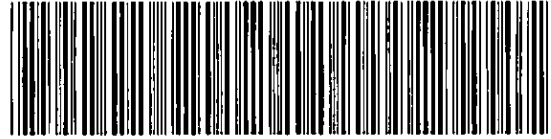
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL
ADVISORY

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DEC 02 2021

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 12/02/2021

Acc#I20160000072

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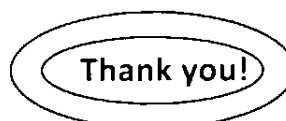
Name:	BL Power Owner LLC
Document #:	
Order #:	14009590

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
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Document _____
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Updater _____
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Ref# _____

Amount: \$ 155.00



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BL Power Owner LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jenni J. Fernandez

Name of Person

AEW Capital Management, L.P.

Firm/Company

2 Seaport Lane, 15th Floor

Address

Boston, MA 02210

City/State and Zip Code

jenni.fernandez@aeaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jenni J. Fernandez

617
at (_____) _____

261-9201

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BL Power Owner LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FBI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2 Seaport Lane, 15th Floor
(Street Address of Principal Office)

6. 2 Seaport Lane, 15th Floor
(Mailing Address)

Boston, MA 02210

Boston, MA 02210

c/o AEW Capital Management, L.P.

c/o AEW Capital Management, L.P.

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (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.

By: C T Corporation System
(Registered agent's signature)

2021 DEC -2 PM 12:42
TALLAHASSEE, FL

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:

☐ Manager Name: Carrie A. Bellerby

☐ Member Address: c/o AEW Capital Management,

☒ Authorized 2 Seaport Lane, 15th Floor

Boston, MA 02210

Person

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☐ Manager Name: Seth E. Berger

☐ Member Address: c/o AEW Capital Management

☒ Authorized 2 Seaport Lane, 15th Floor

Boston, MA 02210

Person

☐ Other _____ ☐ Other _____

☐ Manager Name: Daniel J. Bradley

☐ Member Address: c/o AEW Capital Management

☒ Authorized 2 Seaport Lane, 15th Floor

Boston, MA 02210

Person

☐ Other _____ ☐ Other _____

☐ Manager Name: Alec D. Burleigh

☐ Member Address: c/o AEW Capital Management

☒ Authorized 2 Seaport Lane, 15th Floor

Boston, MA 02210

Person

☐ Other _____ ☐ Other _____

☐ Manager Name: Michael P. Byrne

☐ Member Address: c/o AEW Capital Management

☒ Authorized 2 Seaport Lane, 15th Floor

Boston, MA 02210

Person

☐ Other _____ ☐ Other _____

☐ Manager Name: James J. Finnegan

☐ Member Address: c/o AEW Capital Management

☒ Authorized 2 Seaport Lane, 15th Floor

Boston, MA 02210


Person

☐ 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.

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

James Finnegan, Authorized Signatory

Typed or printed name of signee

AUTHORIZED PERSONS

Joshua Heller, Authorized Person

c/o AEW Capital Management, L.P.

Two Seaport Lane, 15th Floor

Boston, MA 02210

Jonathan E. Martin, Authorized Person

c/o AEW Capital Management, L.P.

Two Seaport Lane, 15th Floor

Boston, MA 02210

Thomas E. Mullahey, Authorized Person

c/o AEW Capital Management, L.P.

Two Seaport Lane, 15th Floor

Boston, MA 02210

Neal K. Sharma, Authorized Person

c/o AEW Capital Management, L.P.

Two Seaport Lane, 15th Floor

Boston, MA 02210

Jenni J. Fernandez, Authorized Person

c/o AEW Capital Management, L.P.

Two Seaport Lane, 15th Floor

Boston, MA 02210

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BL POWER OWNER 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 SECOND DAY OF DECEMBER, A.D. 2021.

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



6313242 8300

SR# 20213956602

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204843436

Date: 12-02-21