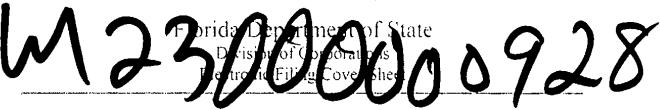
16144554862

24/23, 4:33 PM

Division of Corporations



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.

(((H23000031100 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-5383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845

Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: mbd_legal_entity_requests_us@morganstanley.com

Foreign Limited Liability Company POMPANO BEACH BUSINESS CENTER II OWNER, LLC

| Certificate of Status | . 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$155,00 |

Electronic Filing Menu — Corporate Filing Menu

Help S. F. S. S. 17720 200

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Pompano Beach Business Center II Owner, LLC

| Delaware (Autodiction under the law of w December 20th, 2022 | hich foreign limued liability company is organized) | 92-1294023 3. | | | | |
|---|--|---|----------|--|--|--|
| | high foreign limited liability company is organized; | | | | | |
| December 20th, 2022 | | d) (FFI number, if applicable) | | | | |
| • | | | | | | |
| | (Date first transacted business in Florids, if pr (See sections 605.0904 & 605.0905, F.S. to de | or to registration) termine penalty hability) | | | | |
| 1585 Broadway | | 1585 Broadway | | | | |
| cet Address of Principal Office) | | (Mailing Address) | | | | |
| New York, NY 10036 | | New York, NY 19036 | | | | |
| US | | US | :: :: | | | |
| Name and <u>street addres</u> | ss of Florida registered agent: (P.O. | Box <u>NOT</u> acceptable) | ·1 | | | |
| Name and <u>street address</u> Name: | ss of Florida registered agent: (P.O. C T Corporation System | | | | | |
| | _ | Box <u>NOT</u> acceptable) | | | | |
| Name: | C T Corporation System 1200 South Pine Island Road Plantation | Box <u>NOT</u> acceptable) | | | | |

| Manager | Name and Address: | Title or Capacity: | | Name and Address: |
|------------|--|--------------------|-------------|---------------------------------------|
| | Name: Pompano Beach Business Center II Mezz, LLC | Manager | Name: | 77.77.888.8 |
| Member | Address: | II Member | Address: | |
| Authorized | New York, NY 10036 | Authorized | | |
| Person | | Person | | |
| Other | Other | □Other | | Other |
| Manager | Name: | I Manager | Name: | |
| Member | Address: | ☐ Member | Address: | |
| Authorized | | - Authorized | | |
| Person | | Person | | · · · · · · · · · · · · · · · · · · · |
| Other | Other | □ Other | | Other |
| Manager | Nапю: | ∐ Manager | Name: | · |
| Member | Address: | — Member | Address: | |
| Authorized | | ☐ Authorized | • | |
| Person | | Person | ***** | |
| ()ther | Other | □Other | | Other |

< 7



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

DELAWARE, DO HEREBY CERTIFY "POMPANO BEACH BUSINESS CENTER II

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 TWENTY-FOURTH DAY OF

JANUARY, A.D. 2023.

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

Authentication: 202561375

Date: 01-24-23