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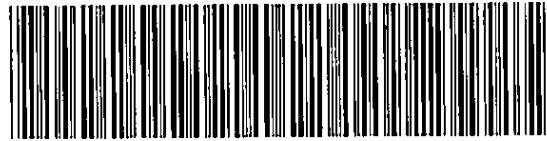
(Business Entity Name)

(Document Number)

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ALLAHASSEE 1100

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**FOREIGN INC**

1. **WILBUR-ELLIS HOLDINGS II, INC.**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

*File 2nd*

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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. Wilbur-Ellis Holdings II, 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 3. 47-5203608  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 345 California Street 6. 345 California Street  
(Street Address of Principal Office) (Mailing Address)  
27th Floor  
San Francisco, CA 94104 USA

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

Name: Registered Agent Solutions, Inc.  
Office Address: 155 Office Plaza Dr., Suite A  
Tallahassee, Florida 32301  
(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.*

*Brandon Weyl*

(Registered agent's signature)

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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):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>See attachment</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

 2/10/23  
Signature of an authorized person  
John P. Thacher  
(Typed or printed name of signer)

### Attachment

Names, titles, and usual business addresses of the current company officials of the Limited Liability Company:

Name	Title(s)	Business Address
Brayton W. Bailey	Manager	345 California Street, 27th Floor San Francisco, CA 94104
Alan E. Barton	Manager	345 California Street, 27th Floor San Francisco, CA 94104
Bruce L. Beretta	Manager	345 California Street, 27th Floor San Francisco, CA 94104
John L. Buckley	Manager, President, and CEO	345 California Street, 27th Floor San Francisco, CA 94104
William B. Buckner	Manager	345 California Street, 27th Floor San Francisco, CA 94104
Jennifer Convery	Manager	345 California Street, 27th Floor San Francisco, CA 94104
Richard S. Grey	Manager	345 California Street, 27th Floor San Francisco, CA 94104
Molly Montgomery	Manager	345 California Street, 27th Floor San Francisco, CA 94104
Matthew H. Rowland	Manager	345 California Street, 27th Floor San Francisco, CA 94104
David J. Thacher	Manager	345 California Street, 27th Floor San Francisco, CA 94104
John P. Thacher	Manager and Executive Chairman	345 California Street, 27th Floor San Francisco, CA 94104
Michael D. Wilbur	Manager	345 California Street, 27th Floor San Francisco, CA 94104
Michael J. Hunter	CFO and VP	345 California Street, 27th Floor San Francisco, CA 94104
Timothy J. Nestler	Secretary and VP	345 California Street, 27th Floor San Francisco, CA 94104
Sherri Sides	VP	345 California Street, 27th Floor San Francisco, CA 94104
Jeanne Forbis	VP	345 California Street, 27th Floor San Francisco, CA 94104
Amie Thesingh	VP	345 California Street, 27th Floor San Francisco, CA 94104
Tamara Anthony	Treasurer	345 California Street, 27th Floor San Francisco, CA 94104
Roger Tanaka	Controller	345 California Street, 27th Floor San Francisco, CA 94104

# Delaware

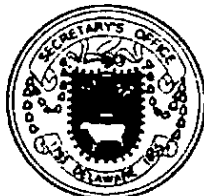
The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WILBUR-ELLIS HOLDINGS II, 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-SECOND DAY OF FEBRUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WILBUR-ELLIS HOLDINGS II, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2015.

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



5835694 8300

SR# 20230637322

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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

Jeffrey W. Bullock, Secretary of State

Authentication: 202764039

Date: 02-22-23