

M2300000 3525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

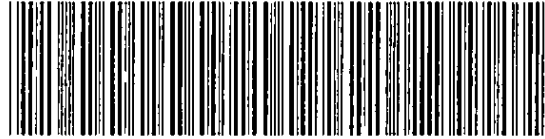
(Business Entity Name)

(Document Number)

Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Instructions to Filing Officer:

Office Use Only



300404764803

RECEIVED  
2023 MAR 17 AM 10:37  
CLERK OF SUPERIOR COURT  
JANUARY 2023  
FLORIDA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO.

~~120000000195~~ **AT**

REFERENCE

593540  
Please give original 4307052

AUTHORIZATION

COST LIMIT

: \$ 155.00

ORDER DATE : March 16, 2023

ORDER TIME : 9:45 AM

ORDER NO. : 593540-005

CUSTOMER NO: 4307052

FOREIGN FILINGS

NAME: SOUTH FLORIDA GATEWAY III  
PROPERTY LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX        CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SOUTH FLORIDA GATEWAY III PROPERTY 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:

MARGARET C. DIVITO  
Name of Person

NIXON PEABODY LLP  
Firm/Company

70 W. MADISON ST. STE. 5200  
Address

CHICAGO, IL 60602-4378  
City/State and Zip Code

MCDIVITO@NIXONPEABODY.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARGARET C. DIVITO      312      977-9259  
Name of Contact Person      at (      )      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. SOUTH FLORIDA GATEWAY III PROPERTY 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.

(FEI number, if applicable)

UPON QUALIFICATION

4.

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

300 SOUTH TRYON STREET, SUITE 2500

5. (Street Address of Principal Office)

6.

(Mailing Address)

CHARLOTTE, NC 28202

ATTN: CORPORATE REAL ESTATE

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

Name:

CORPORATION SERVICE COMPANY

Office Address:

1201 HAYES STREET

TALLAHASSEE

(City)

, Florida

32301

(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.

CORPORATION SERVICE COMPANY

By:

(Registered agent's signature)

Eylima Bahar  
Assistant Vice President

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]:      **\*\*SEE ATTACHED\*\***

<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: _____	<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.

SFL GATEWAY III JV LLC  
BY: TR SOUTH FLORIDA GATEWAY LLC  
BY: BARINGS LLC, MANAGER BY: Elena Walsh  
Signature of an authorized person  
Elena Walsh  
Typed or printed name of signer

**ATTACHMENT TO**  
**FLORIDA APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY**  
**FOR AUTHORITY TO TRANSACT BUSINESS IN FLORIDA**  
**SOUTH FLORIDA GATEWAY III PROPERTY LLC**

8. List names, title or capacity and addresses of the primary members/managers or persons authorized to manage:

<i><b>Title or Capacity</b></i>	<i><b>Name</b></i>	<i><b>Address</b></i>
Member	SFL Gateway III JV LLC	300 South Tryon Street, Suite 2500, Charlotte, NC 28202
Authorized Person	Elena Walsh	300 South Tryon Street, Suite 2500, Charlotte, NC 28202
Authorized Person	Cassie McCrain	300 South Tryon Street, Suite 2500, Charlotte, NC 28202
Authorized Person	Mark Freeman	300 South Tryon Street, Suite 2500, Charlotte, NC 28202
Authorized Person	Christopher Cassella	300 South Tryon Street, Suite 2500, Charlotte, NC 28202
Authorized Person	Kevin Miller	300 South Tryon Street, Suite 2500, Charlotte, NC 28202
Authorized Person	Payton Larson	300 South Tryon Street, Suite 2500, Charlotte, NC 28202

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTH FLORIDA GATEWAY III PROPERTY 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 FOURTEENTH DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTH FLORIDA GATEWAY III PROPERTY LLC" WAS FORMED ON THE FOURTEENTH DAY OF MARCH, A.D. 2023.

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



7348593 8300

SR# 20230993762

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 "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202916441

Date: 03-14-23