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### CT CORP

#### (850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

07/07/2025

Date:

		Acc#I20160000072	W. C.
Name:	11801 Indust	ry Intermediate LLC	
Document #:			
Order #:	16405563		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
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Thank you!

#### COVER LETTER

	Division of Corporations					
SUBJE	11801 Industry Intermediate LLC CT:					
	Nair	ne of Limited Liability Company				
The enc Existen	losed "Application by Foreign Limited Liability ce, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida				
Please r	eturn all correspondence concerning this matter	to the following:				
	Jeffrey Krasnow					
		Name of Person				
	J.P. Morgan Investment Managemen	t Inc.				
	Firm/Company					
	277 Park Avenue, 9th Floor					
	Address					
	New York, New York 10172					
		City/State and Zip Code				
	jetfrey.krasnow@jpmorgan.com					
	E-mail address: (10 b	pe used for future annual report notification)				
For furt	her information concerning this matter, please ca	all:				
	Jeffrey Krasnow	212 648-2999 at (				
	Name of Contact Person	Area Code Daytime Telephone Number				
Mailing Address:		Street Address:				
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE  ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee					

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

IN COMPLANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 11801 Industry Interme	diate LLC Limited Liability Company; must include "Limited	Liability Company,"	L.L.C.," of "LLC")	<del>_</del>	
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida. The afternate name i	mist include "Limited Liabi	dity Company," "L.L.C," or "LLC	
Delaware 2.	hich foreign limited liability company is organized)	3	(FEI number,	(Capplicable)	
N/A	men tetergir minted materiny company (Corganized)		(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
4	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registration ) ne penalty liability)			
c/o J.P. Morgan Investi 5. (Street Address of Principal Office)	ment Management Inc.		organ Investment N	lanagement Inc.	
277 Park Avenue, 9th I		277 Park &	Avenue, 9th Floor		
New York, New York 10172		New York, New York 10172			
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)		2025 JUL	
Name:	C T Corporation System			FILE JL - 7	
Office Address:	1200 South Pine Island Road	<del></del> -		PH 12:	
	Plantation	, Flo	orida (Zip code)	. 54	

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: Nick Bulleri - Assistant Secretary

(Registered agent's signature)

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: J.P.M. REIT Op. Ptnrship, L.P.	□Manager	Name: Jeffrey Krasnow
■Member	Address: c/o J.P. Morgan Inv. Mgmt Inc.	□Member	Address: c/o J.P. Morgan Inv. Mgmt Inc.
□Authorized	277 Park Avenue. 9th Floor	■ Authorized	277 Park Avenue, 9th Floor
Person	New York, New York 10172	Person	New York, New York 10172
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	Other
9. Attached is a cer- jurisdiction under the of the translator mu	is executed in accordance with section 605.020.	orida Department of State duly authenticated by the e is in a foreign language 3 (1) (b). Florida Statutes	Annual Report form.  official having custody of records in the , a translation of the certificate under oath  . I am aware that any false information
submitted in a docu	ment to the Department of State constitutes a th	ird degree leiony as provi	aca for in \$.817.133, r.s.
	Juffry Erasnow Signature	of an authorized person	<del></del>

Typed or printed name of signee

Jeffrey Krasnow

Page 1



I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY "11801 INDUSTRY INTERMEDIATE 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 SEVENTH DAY OF JULY, A.D. 2025.

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

Charuni Patibanda-Sanchez, Secretory of State
Authentication: 204124666

C. G. Sancher

Date: 07-07-25