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From: Lexus Wingo

12/10/21, 2:06 PM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

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

Email Address:_

Foreign Limited Liability Company Glades Industrial, LLC

| Certificate of Status | U |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 04 |
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PLEASE HONOR THE ORIGINAL FILING DATE OF 12/10/2021

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Help

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. Glades Industrial, LLC | | | | | |
|---|---|------------------|---|--------------------------------|----------|
| (Name of Foreign | Limited Liability Company; must include "Lin | nited Liabilit | y Company,****L.L.C.,** or **LLC.**) | | |
| (If name unavailable, errer alternate | name adopted for the purpose of transacting business i | n Florida. The | alternate name must include "Limited Liabilit | y Company," "L.L.C," or "LLC." |) |
| Delaware 2. (Jurisdiction under the law of w | hich foreign limited lizbility company is organized) | 3. | (PEI number, if | applicable) | |
| 4 | (Date first transacted business in Florida, if prior (See accions 605.0904 & 605.0905, F.S. to det | r to registratio | n.) Habitiry) | | |
| c/o Seefried Industrial 5. (Street Address of Principal Office) | | | c/o Seefried Industrial Propertie | rs, Inc. | |
| 3333 Riverwood Parky | vay, Suite 200 | | 3333 Riverwood Parkway, Suite | : 200 | |
| Atlanta, Georgia 30339 |) | | Atlanta, Georgia 30339 | | |
| 7. Name and street address | ss of Florida registered agent: (P.O. B | ox <u>NOT</u> | acceptable) | 2022 SEC TALL | |
| Name: | C T Corporation System | | | JAN 12 PRETAR) AHASSI | <u>T</u> |
| Office Address: | 1200 South Pine Road | | | 유유 | |
| | Plantation (Cuy) | | 33324 , Florida | I 9: 39 STATE LURIDA | J |

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.

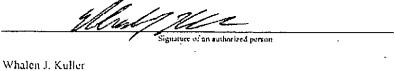
Nichol McCroy, Asst. Secretary
(Registered applies signature)

| 8. | For initial indexing purposes, | list names. | title or capacity and addresses of the primary | members/managers or persons authorized to |
|----|--------------------------------|-------------|--|---|
| ma | nage (up to six (6) total]: | | , | |

| Title or Capacity: | Name and Address: | Title or Capacity: | Name and Address: |
|--------------------|--|--------------------|---|
| ■ Manager | Name: Robert S. Rakusin | ■Manager | Name: |
| □Member | Address: c/o Seefried Industrial Properties, I | nc. | Address:c/o Secfried Industrial Properties, Inc |
| □Authorized | 3333 Riverwood Parkway, Suite 200 | □Authorized | .3333 Riverwood Parkway, Suite 200 |
| Person | Atlanta, Georgia 30339 | Person | Atlanta, Georgia 30339 |
| □Other | Other | Other | · □Other |
| | | | • |
| ■Manager | Name: Seefried Industrial Properties, Inc. | □Manager | Name: |
| □Member | Address: | □Member | Address: |
| □Authorized | 3333 Riverwood Parkway, Suite 200 | ☐ Authorized | |
| Person | Atlanta, Georgia 30339 | Person | |
| □Other | Other | □Other | |
| | | | |
| □Manager | Name: | . DManager | Name: |
| □Member | Address: | □Member | Address: |
| □Authorized | | □Authorized | |
| Person | | Person | |
| □Other | | []Other | [i]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.



Delaware

The First State

Page 1

From: Lexus Wingo

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

DELAWARE, DO HEREBY CERTIFY "GLADES INDUSTRIAL, 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 TENTH DAY OF DECEMBER, A.D. 2021.

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

Authentication: 204936910

Date: 12-10-21

6463888 8300 SR# 20214048520

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