

M22000017501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

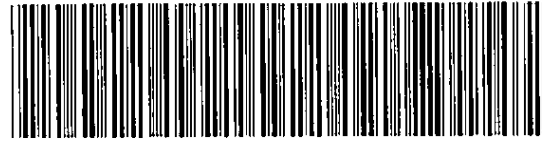
(Document Number)

Certific Copies \_\_\_\_\_

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

Special Instructions to Filing Officer:

Office Use Only



500397940325

GEORGIA SECRET STATE  
FILING OFFICE

2022 NOV 21 PM 4: 22

APPROVED  
AND  
FILED

2022 NOV 21 AM 11: 37

NOV 21 2022  
K. Brumby

FILE 2ND

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

ACCOUNT NO. : I20000000195

REFERENCE : 148556 4304847

AUTHORIZATION :

COST LIMIT : *Eyliena Baker*  
\$ 125.00

ORDER DATE : November 18, 2022

ORDER TIME : 9:04 AM

ORDER NO. : 148556-010

CUSTOMER NO: 4304847

FOREIGN FILINGS

NAME: MIAMI DOUGLAS TWO GP LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

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



**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. Miami Douglas Two GP 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. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. c/o Barings LLC  
(Street Address of Principal Office)  
300 South Tryon Street, Suite 2500  
Charlotte, NC 28202

6. c/o Barings LLC  
(Mailing Address)  
300 South Tryon Street, Suite 2500  
Charlotte, NC 28202

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

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

APPROVED  
AND  
FILED  
2022 NOV 21 PM 4:22  
TALLAHASSEE, FLORIDA  
CLERK OF STATE

**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: Eylina Bahor  
Corporation Service Company  
Assistant Vice President  
(Registered agent's signature)

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]:

**Title or Capacity:**  Manager  Member  Authorized Person  Other \_\_\_\_\_

**Name and Address:**  
 Name: Christopher Cassella  
 Address: c/o Barings LLC  
300 S. Tryon St., Ste 2500  
Charlotte, NC 28202

**Title or Capacity:**  Manager  Member  Authorized Person  Other \_\_\_\_\_

**Name and Address:**  
 Name: Mark Freeman  
 Address: c/o Barings LLC  
300 S. Tryon St., Ste 2500  
Charlotte, NC 28202

Manager  Member  Authorized Person  Other \_\_\_\_\_

**Name and Address:**  
 Name: John Kennedy  
 Address: c/o Barings LLC  
300 S. Tryon St., Ste 2500  
Charlotte, NC 28202

Manager  Member  Authorized Person  Other \_\_\_\_\_

**Name and Address:**  
 Name: Joseph Gorin  
 Address: c/o Barings LLC  
300 S. Tryon St., Ste 2500  
Charlotte, NC 28202

Manager  Member  Authorized Person  Other \_\_\_\_\_

**Name and Address:**  
 Name: Maureen Joyce  
 Address: c/o Barings LLC  
300 S. Tryon St., Ste 2500  
Charlotte, NC 28202


Manager  Member  Authorized Person  Other \_\_\_\_\_

**Name and Address:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**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.

  
 \_\_\_\_\_  
 Signature of an authorized person

Christopher Cassella

\_\_\_\_\_  
 Typed or printed name of signer

# Delaware

Page 1

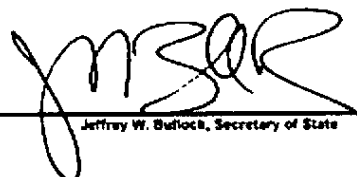
The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MIAMI DOUGLAS TWO GP 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-FIRST DAY OF NOVEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIAMI DOUGLAS TWO GP LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2019.

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



  
Jeffrey W. Bullock, Secretary of State

7299542 8300

SR# 20224065296

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

Authentication: 204901231

Date: 11-21-22