## Secretary of State **Application for Registration** Foreign Limited Partnership (LP)

## -FILED-

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Secretary of State	LP-5	For Office Us	e Only
Application for Registration			· ·
Foreign Limited Partnership (L	P)	-FILE	ט-
Toleigh Limited Partnership (EP)		File No.: 2025652097	11
		Date Filed: 1/2/2025	
Foreign Certificate of Good Standing is required,			
Filing Fee - \$70.00			
Certified Copy Fee (Optional) - \$5.00		·	
Note: Registered LPs in California may have to pay minimum \$8 California Franchise Tax Board each year. For more information, <a href="https://www.ftb.ca.gov/">https://www.ftb.ca.gov/</a> .		Above Spece For Office	a Haa Oolu
4 Name of Carriers I D (O.)		Above Space For Office	e Use Orlly
<ol> <li>Name of Foreign LP (Only enter an alternate name if the foreign</li> <li>Enter the Exact Name of the Foreign LP (as listed on the Certificate)</li> </ol>		is not available in CA.)  Alternate Name to be Used in Californi	a if required
of Good Standing.)	ib. Enter the	Alternate Name to be used in Camorni	a, ii requiled.
Realty Income U.S. Core Plus 4, LP			
2. LP Jurisdiction (Ensure that the jurisdiction matches the attach	ed Certificate of Goo	d Standing.)	
Jurisdiction (State, foreign country or place where this LP is formed.)			· · · · · · · · · · · · · · · · · · ·
	elaware		
3. Business Addresses (Enter the complete business addresse	es, Items 3a and 3b c	annot be a P.O. Box or "in care of" an ir	ndividual or entity.)
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbr	eviations) State	Zip Code
11995 El Camino Real	San Dieg	jo CA	92130
b. Mailing Address of Principal Office, if different than item 3a	City (no abbr	eviations) State	Zip Code
c. Address of required office in Jurisdiction of Formation, if any	City (no abbr	eviations) State	Zip Code
11995 El Camino Real	San Diego	CA	92130
<ol> <li>Service of Process (Must provide either Individual OR Corpor INDIVIDUAL – Complete Items 4a and 4b only. Must include agent'</li> </ol>	•	ornia street address.	
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffi
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbr	I	1 '
CORPORATION - Complete Item 4c only. Only include the name of	f the registered agen	CA t Corporation	
c. California Registered Corporate Agent's Name (if agent is a corporation) –		· · · · · · · · · · · · · · · · · · ·	
Corporation Service Company Which Will Do Busine	ess In Californi	a As CSC - Lawyers Incorpo	orating Service
5. General Partners (Enter the name and addresses of all the Ger	neral Partners. Attac	n additional pages, if necessary.)	
5a. General Partner's Name Realty Income U.S. Core Plus General Partner,	LLC		·
5b. General Partner's Address	City (no abbr	eviations) State	Zip Code
11995 El Camino Real	San Dieg	jo CA	92130
6. Foreign Limited Liability Limited Partnership (Check t	his box only if applica	ible)	
Check this box if the foreign limited partnership is a foreign lin	mited liability limite	d partnership.	
All attachments are part of this document. I declare that I a deed. I further declare the information is true and correct, a	and I am authoriz		-
		r, LLC, General Partner	
General Partner's Signature		e or Print Name	



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The First State

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

DELAWARE, DO HEREBY CERTIFY "REALTY INCOME U.S. CORE PLUS 4, LP" 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 SECOND DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REALTY INCOME

U.S. CORE PLUS 4, LP" WAS FORMED ON THE SECOND DAY OF OCTOBER, A.D.

2024.

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

Authentication: 202606815

Date: 01-02-25