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Secretary of State

Application to Register a Foreign Limited **Liability Company (LLC)**

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to

For Office Use Only

-FILED-

File No.: 202464910957 Date Filed: 12/9/2024

https://www.ftb.ca.gov/.		This Space For Office Use Only				
1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)						
ARE-SD Finance, LLC						:
1b. California Alternate Name, If Required (Only enter an alternate name if the LLC name in 1a not available in California.)						
2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached Certificate of Good Standing.)						
a. Jurisdiction (State, foreign country or place where this LLC is formed.)						
Delaware						
b. Authority Statement (Do not alter Authority Statement)		<u>, , , , , , , , , , , , , , , , , , , </u>				
This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2a.						
3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)						
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbreviations)			State	Zip Code	
26 North Euclid Avenue	Pasadena			CA	91101	
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)			State	Zip Code	
26 North Euclid Avenue	Pasadena			CA	91101	
c. If the Mailing Address is the same as item 3a or 3b, check the applicable box: 3b						
d. Mailing Address - if different thaम item 3a or 3b	City (no abbreviations)			State	Zip Code	
4. Service of Process (Must provide either Individual OR Corporation.)						
INDIVIDUAL — Complete Items 4a and 4b only. Must include agent's full in a. California Agent's First Name (if agent is not a corporation)	Т	Middle Name Last Name Suffix				0
a. Camorna Agents First Name (ir agent is not a corporation)	Milodie Name Last Name				Sumx	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Code		
				CA		
CORPORATION - Complete Item 4c only. Only include the name of the registered agent Corporation.						
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 4a or 4b						
Corporation Service Company Which Will Do Business In California	mia As CSC -	Lawyers I	ncorporating S	ervice		

LLC-5

5. Read and Sign Below (Title not required.)

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign Scott A. Sherwood, Vice President - Real Estate Legal Affairs of on behalf of the preign LLC

ARE-QRS, Corp., general partner of Alexandria Real Estate Equities, L.P., managing member of ARE-SD Finance, LLC

Type and Print Name

Signature

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARE-SD FINANCE, 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 NINTH DAY OF DECEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARE-SD FINANCE,

LLC" WAS FORMED ON THE SIXTH DAY OF DECEMBER, A.D. 2024.

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

Authentication: 205073017

Date: 12-09-24