

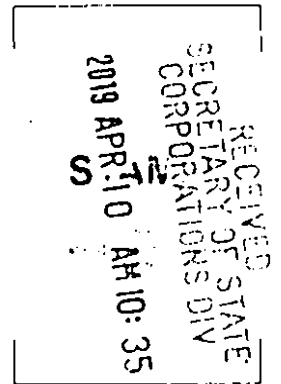


State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

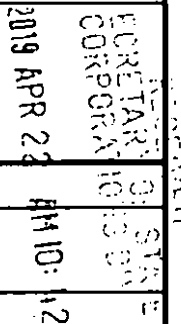
**Application for Registration**  
**FOREIGN Limited Liability Company**

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-49, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:



1. The name of the limited liability company is:		
<b>Sabal TL1, LLC</b>		
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
The name, if different, under which it proposes to register and transact business in Rhode Island is:		
2. The LLC is organized under the laws of: <b>DELAWARE</b>		
3. The date of its organization is: <b>04/04/2014</b>		
And the period of its duration is: <b>CHECK ONE BOX ONLY</b>		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
4. The name and address of the resident agent/office in Rhode Island is:		
Agent Name <b>Corporation Service Company</b>		
Street Address ( <u>NOT</u> a P.O. Box) <b>222 Jefferson Blvd., Suite 200</b>		
City/Town <b>Warwick</b>	State <b>RHODE ISLAND</b>	Zip Code <b>02888</b>
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
<b>Commercial Real Estate.</b>		
Check the box to indicate an attachment <input type="checkbox"/>		



**MAIL TO:**  
**Division of Business Services**  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.n.gov

10:42  
**FILED**  
 APR 22 2019  
 BY **BC61NP**  
 FORM 450 - Revised: 01/2019

6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:

**c/o Corporation Service Company 251 Little Falls Drive, Wilmington DE 19808**

8. The mailing address for the limited liability company is:

**4 Park Plaza, Suite 2000  
Irvine CA 92614**

9. Management of the Limited Liability Company:

The Limited Liability Company is to be managed by: **CHECK ONLY ONE BOX**

☐ By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)

☒ By one (1) or more managers (List managers below)

MANAGER	ADDRESS
Sabal Commercial Lending, LLC	4 Park Plaza, Suite 2000 Irvine CA 92614
R. PATTERSON JACKSON	4 Park Plaza, Suite 2000 Irvine CA 92614

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.


11. Date when this application for Certificate of Registration will be effective: **CHECK ONE BOX ONLY**

☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) \_\_\_\_\_

*Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of LLC <b>Sabal TL1, LLC</b>	Date <b>4/2/2019</b>
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Signature of Authorized Person  SIGN DOCUMENT HERE

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SABAL TL1, 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-EIGHTH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SABAL TL1, LLC" WAS FORMED ON THE FOURTH DAY OF APRIL, A.D. 2014.

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

RECEIVED  
STATE  
SECRETARY OF STATE  
CORPORATIONS DIV  
2019 APR 22 AM 10:42

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STATE  
SECRETARY OF STATE  
CORPORATIONS DIV  
2019 APR 10 AM 10:35



  
Jeffrey W. Bullock, Secretary of State

5511740 8300

SR# 20192353009

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

Authentication: 202534696

Date: 03-28-19



SABAL TL2, LLC  
4 PARK PLAZA | SUITE 2000  
IRVINE | CALIFORNIA 92614

P 949.255.2660 | F 888.947.3232

WWW.SABALCAP.COM

April 17, 2019

To: State of Rhode Island

RE: Sabal TL1, LLC – Name Consent from Sabal TL2, LLC

To whom this may concern,

This letter is to be considered as authorization and our consent to Sabal TL1, LLC to use that name in any state.

I, R. Patterson Jackson, President and CEO of Sabal TL2, LLC, hereby give consent to Sabal TL1, LLC to use the name Sabal TL1, LLC.

Thank You,

R. Patterson Jackson  
President and CEO

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STATE  
SECRETARY OF  
CORPORATIONS DIV.  
2019 APR 22 AM 10:42



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

April 22, 2019 10:42 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

