

Maintenance Form

ARES REAL ESTATE EXCHANGE

Return your completed form to:

Mail

Ares Wealth Management Solutions 844.649.4626
c/o Ares Real Estate Exchange Operations
518 17th Street, 17th Floor
Denver, CO 80202

Phone

Fax

303.339.3691

Email

BCXClientServices@aresmgmt.com

What would you like to do?

- ☐ Change Address/Phone/Email (Complete sections 1, 2 & 7)
- ☐ Name Change (Complete sections 1, 3, 7 and Email in 2 if applicable)
- ☐ Change/Add Interested Parties (Complete sections 1, 4 & 7)
- ☐ Paperless/Electronic Documents (Complete sections 1, 5 & 7)
- ☐ Update Registered Representative/RIA/Broker/Dealer (Complete sections 1, 6 & 7)

Please contact Ares Real Estate Exchange Operations for additional information regarding the below requests (do not use this Maintenance Form):

- Change of Ownership
- Operating Partnership Redemption Request
- Add Beneficiaries
- Redeem Units

1. Current Subscriber Information – Please provide information to indicate how shares are currently registered

☐ AREIT Operating Partnership LP (AREITOP)

- ☐ AREITOP – D Share Class
- ☐ AREITOP – I Share Class
- ☐ AREITOP – S Share Class
- ☐ AREITOP – T Share Class
- ☐ AREITOP – E Share Class

☐ Ares Diversified Real Estate Exchange (ADREX)

Property/Portfolio Name: _____

☐ Ares Industrial Real Estate Exchange (AIREX)

Property/Portfolio Name: _____

Investor Name

Co-Investor Name

Investor Social Security/Taxpayer ID #

Co-Investor Social Security/Taxpayer ID #

Investor Date of Birth/Articles of Incorporation (MM/DD/YY)

Co-Investor Date of Birth/Articles of Incorporation (MM/DD/YY)

Current Address: Street Address

City

State

ZIP

Ares Account Number

Current Home Telephone

Current Email Address

2. Change Address/Phone/Email

A P.O. Box will not be accepted as a residential address. A rural route, APO or FPO address will be accepted.

New Mailing Address: Street

City

State

ZIP

New Residential Address (if applicable): Street

City

State

ZIP

New Daytime Telephone

New Evening Telephone

New Email Address

3. Name Change

Print and sign both your former name and new name to verify that they represent one and the same person. In section 8, sign your new name and include a copy of marriage, divorce or court document with the name change.

Former Name (Print)	New Name (Print)
Signature of Former Name	Signature of New Name

4. Change or Add Interested Parties

By identifying the Interested Parties below, you hereby authorize the applicable Fund(s) to send any and all information about the Subscriber's Interests in the Fund(s) to the Interested Parties identified below. This contact information may be updated and communicated to the Fund(s) from time to time.

Please identify below Interested Parties other than your Financial Adviser or Private Wealth Adviser:

Interested Party Name			
Street Address	City	State	ZIP
Telephone		Email Address	

5. Enroll in Electronic Consent

Instead of receiving paper copies of the prospectus, prospectus supplements, annual reports, proxy statements, tax documents, and other stockholder communications and reports, you may elect to receive electronic delivery of stockholder communications from programs advised by Ares Commercial Real Estate Management, LLC (ACREM). If you would like to consent to electronic delivery, including pursuant to email, please check the box below for this election.

We encourage you to reduce printing and mailing costs and to conserve natural resources by electing to receive electronic delivery of stockholder communications and statement notifications. By consenting below to electronically receive stockholder communications, including your account-specific information, you authorize said program(s) to either (i) email stockholder communications to you directly or (ii) make them available on our website and notify you by email when and where such documents are available.

Your consent to electronic delivery will be on an unlimited duration and you will not receive paper copies of these electronic materials unless (i) specifically requested, (ii) you inform us in writing that you revoke your consent, (iii) the delivery of electronic materials is prohibited or (iv) we, in sole discretion, elect to send paper copies of materials.

By consenting to electronic access, you will be responsible for your customary internet service provider charges and may be required to download software in connection with access to these materials.

I consent to electronic delivery ☐

Email Address (if blank, the Email address in section 1 or 2 will be used)

6. Registered Representative (RR), Registered Investment Adviser (RIA) or Broker/Dealer (B/D) Change

Former RR/RIA _____ Former Broker/Dealer Name _____

New Registered Representative, Registered Investment Adviser or Broker/Dealer

Name _____

Street Address _____ City _____ State _____ ZIP _____

Telephone _____ Email Address _____

RR or RIA Number _____

Brokerage Account Number (if applicable) _____ If RIA, Clearing Firm Name _____

7. Signatures

Signature of Investor or Trustee _____ Date _____ Signature of Co-Investor or Trustee (if applicable) _____ Date _____

Not a Deposit | Not FDIC Insured | Not Guaranteed by the Bank | May Lose Value | Not Insured by any Federal Government Agency