## M0300000 168

(Req	uestor's Name)	
(Add	ress)	
(Addi	ress)	
(City/	State/Zip/Phone	<u></u> ∌#⟩
V-14.		,
PICK-UP	☐ WAIT	MAIL
<del></del>	<u>-</u>	<del></del>
(D)		
(Busi	ness Entity Nam	ne)
(Docu	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ina Officer:	
		2
	1	( D
	-	1605t
		Jus
	Office Use Only	v 🗸



900009661859

O3 JAN 15 PH 1: 11





ACCOUNT NO. : 072100000032

REFERENCE: 892474 7143029 .

AUTHORIZATION : Tatricia

COST LIMIT : \$ 125.00

ORDER DATE: January 14, 2003

ORDER TIME : 2:47 PM

ORDER NO. : 892474-010

CUSTOMER NO: 7143029

CUSTOMER: Ms. Rondi J. Boroos

Prologis Trust

14100 East 35th Place

Aurora, CO 80011

FOREIGN FILINGS

NAME: PROLOGIS-MACQUARIE FLORIDA III

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

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

CONTACT PERSON: Amanda Haddan -- EXT# 1155

EXAMINER:

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of	foreign limited lia	bility company)
Delaware_		3.	
Jurisdiction under t	the law of which foreign limited li ompany is organized)	iability	(FEI number, if applicable)
January 8, 200	03	5. Perp	etual
(Date	e of Organization)	(Du	ration: Year limited liability company will cease to exist or "perpetual")
January 10, 20	003 te first transacted business in Flor	ida (See sections	608.501, 608.502, and 817.155, F.S.)
	Avenue, Aurora, Colorado		25 S
		<del></del> .	JAN
	(Street	address of princi	pal office)
If limited liabili	ty company is a manager-m	anaged compar	ny, check here $\square$
The name and u	sual business addresses of t	he managing m	embers or managers are as follows:
FIODOGIS, 141	00 E. 35th Avenue, Aurora	e, Colorado e	nh11-1918
	<u> </u>	<del></del>	
			duly authenticated by the official having custody of re
			ot acceptable. If the certificate is in a foreign languag
translation of the ce	ertificate under eath of the translator	rmust be submitte	d)
. Nature of busin	ness or purposes to be condu	icted or promo	ted in Florida: To engage in any activit
	1 1		
and to exercise	e any powers permitted to	limited liab	ility companies under Florida law.
	the h	unth	
	Signature of a member of	ur an authorizaci	representative of a member.
			cution of this document constitutes
	an affirmation under the penalti		
	Stephen K. Schutte, V	ice President	of Sole Member
	Typed or	printed name of	f signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

uarie Florida III LLC			7
nd the Florida street addre	ess of the registere	ed agent and office are	TANII HASS
Corp	oration Service	Company	m-< or
	(Name)		PH I
	1201 Have Stre	et	
Florida street			
Tallahassee	FI.	32301	
	nd the Florida street address  Corp  Florida street	Corporation Service (Name)  1201 Hays Stree Florida street address (P.O. Box N	Corporation Service Company (Name)  1201 Hays Street Florida street address (P.O. Box NOT ACCEPTABLE)

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

(Signature)

1. The name of the Limited Liability Company is:

Deborah D. Skipper Asst. V. Pres.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROLOGIS-MACQUARIE FLORIDA III 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 EIGHTH DAY OF JANUARY, A.D. 2003.



Darriet Smith Hindson

AUTHENTICATION: 2197539

DATE: 01-10-03

3611881 8300

030012572