M0900001528

(Requestor's Name)
(Address)
<u> </u>
(Address)
(City/State/Zip/Phone #)
P
PICK-UP WAIT MAIL

(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200150861902

04/21/09--01032--007 **125.00



S. HAWKES

APR 2 4 2009

EXAMINER



Beth Talbott, Paralegal Direct Dial: (317) 808-6393 Facsimile: (317) 808-6789

e-mail: beth.talbott@dukerealty.com

April 20, 2009

<u>VIA FEDERAL EXPRESS STANDARD DELIVERY #7975 2085 4238</u>

Florida Department of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: DH Orlando, LLC and DH Tampa, LLC

Dear Sir / Madam,

Enclosed please find for filing the following:

For DH Orlando, LLC:

- 1. Cover Letter
- 2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- 3. Certificate of Designation of Registered Agent/Registered Office
- 4. Delaware Certificate of Good Standing
- 4. Check #0081269 dated April 20, 2009 in the amount of \$125.00

For DH Tampa, LLC:

- 1. Cover Letter
- 2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- 3. Certificate of Designation of Registered Agent/Registered Office
- 4. Delaware Certificate of Good Standing
- 4. Check #0081270 dated April 20, 2009 in the amount of \$125.00



Please return the letters of acknowledgment of filing to me. If you have any questions or concerns, please contact me at 317-808-6393.

Very truly yours,

Beth Talbott Paralegal

BT/kt Enclosures

cc: file

f:\bstalbott\letters 2008\f1 - sos - dh orlando, llc & dh tampa, llc..doc 4/20/2009 12:15:00 PM

COVER LETTER

TO: Registration Section Division of Corporations		
- · · ·		
SUBJECT: DH Orlando, LLC		
(Name of Limited Liability Company)		
	Liability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited	
Please return all correspondence concerning this	matter to the following:	
. Beth Talbott		
(Name of Person)		
Duke Realty Corporation		
(Firm/Company)		
600 E. 96th Street, Suite	100	
(Address)		
Indianapolis, IN 46240	•	
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Beth Talbott	_{at (_} 317 ₎ 808-6393	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations P.O. Box 6327	Division of Corporations	
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
	Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sum{125.00 Filing Fee}\$ \$\sum{130.00 Filing Fee}\$ & Certificate of the following amount:		

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: lame of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 4 04/15/2009 5. Perpetual (Duration: Year limited liability company will cease exist or "perpetual") (Date of Organization) Date of registration (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 600 E. 96th Street, Suite 100, Attn: Legal Dept. Indianapolis, IN 46240 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Duke Realty Limited Partnership 600 E. 96th Street, Suite 100 Indianapolis, IN 46240 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) to acquire, improve, lease, operate, 11. Nature of business or purposes to be conducted or promoted in Florida: finance, manage, own, hold for investment and sell or otherwise dispose of or deal certain real property, and to engage in any and all other lawful acts or activities

Typed or printed name of signee

Ann Colussi Dee, Senior Vice President

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STA UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING ST TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STAFLORIDA.	FATEMENT
1. The name of the Limited Liability Company is:	AR 2
DH Orlando, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	FH 3: 35
2. The name and the Florida street address of the registered agent and office are:	
CT Corporation System (Name)	
1200 South Pine Island Road c/o CT Corporation System Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Plantation FL 33324	

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, Florida Statutes.

City/State/Zip

Burnadette McNamara

(Signature)

Bernadette McNamara

Assistant Secretary

\$ 100.00 Filing Fee for Application
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "DH ORLANDO, 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 THIRTEENTH DAY OF APRIL, A.D. 2009.



4676065 8300

090357054

AUTHENTY CATION: 7242986

DATE: 04-13-09

You may verify this certificate online at corp.delaware.gov/authver.shtml