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10 DEC 16 AMII: 47
SECRETARY OF STATE

J. BRYAN

DEC 17 2010

EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: Duke Crossroads Member,	LLC
Name of Li	mited Liability Company
The enclosed "Application by Foreign Limited Liability Co Existence, and check are submitted to register the above ref	empany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to t	he following:
Beth Talbott	
T	Name of Person
Duke Realty Corporation	
I	Firm/Company
600 E. 96th St., Suite 100	SECO DE TO
	Address
Indianapolis, IN 46240	State and Zip Code Om Om Om Om Om Om Om Om Om O
City/	State and Zip Code
beth.talbott@dukerealty.co	om RATE
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, please call:	
Beth Talbott	at (317) 808-6393
Name of Person Ar	ea Code & Daytime Telephone Number
Division of Corporations Registration Section P.O. Box 6327 Clifto Tallahassee, FL 32314 Clifto	EET ADDRESS: ion of Corporations tration Section on Building Executive Center Circle nassee, FL 32301
Enclosed is a check for the following amount: \$\sum{\$125.00 \text{Filing Fee}}\$ \sum{\$\$130.00 \text{Filing Fee} & \text{Certificate of Status}\$\$	S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1.	Duke Crossroads Member, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
ÇOI	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written is not of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C," "LLC.")
7.	Delaware Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
4.	December 10, 2010 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6.	(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 St., Suite 100
	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
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a salation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: Own, manage, improve,
	operate, finance, lease, hold and sell certain real estate
	James (. 1
	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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

David P. Durm, Vice President, Legal & Asst. Secretary

Typed or printed name of 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.

1. The name of the Limited Liability Company is:	
Duke Crossroads Member, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	10 DEC SECRET
CT Corporation System	ASSI ASSI
(Name)	E E E
1200 South Pine Island Road c/o CT Corporation System Florida Street Address (P.O. Box NOT ACCEPTABLE)	AM II: 47 OF STATE E. FLORIDA
Plantation FL 33324 City/State/Zip	

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.

James M. Halpin

James M. Halpin
- 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)



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The First State

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

DELAWARE, DO HEREBY CERTIFY "DUKE CROSSROADS MEMBER, 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 DECEMBER, A.D.

2010.

10 DEC 16 AMII: 47
SECRETARY OF STATE
ALL AMASSEE, FLORIDA

4911654 8300

101171695

AUTHENTICATION: 8420538

DATE: 12-13-10

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