

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011699

Entity Name: AMB HTD - BEACON CENTRE, LLC

Current Principal Place of Business:

PIER 1, BAY 1
ATTN: LEGAL DEPT
SAN FRANCISCO, CA 94111

Current Mailing Address:

PIER 1, BAY 1
ATTN: LEGAL DEPT
SAN FRANCISCO, CA 94111

FEI Number: 94-3285362

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name PROLOGIS, L.P.
Address PIER 1, BAY 1
City-State-Zip: SAN FRANCISCO CA 94111

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL T. BLAIR

MANAGING DIRECTOR

02/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date