

**B07000000235**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

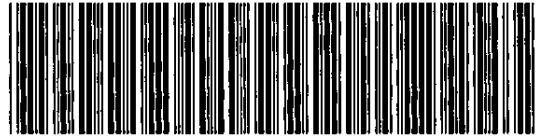
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100235677451

RECEIVED  
2012 JUN 22 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN 22 AM 10:20

4/15/12



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 2380497 7143029

AUTHORIZATION : *[Handwritten signature]*

COST LIMIT : \$ 35.00

ORDER DATE : June 12, 2012

ORDER TIME : 9:39 AM

ORDER NO. : 238049-015

CUSTOMER NO: 7143029

CHANGE OF AGENT

NAME: PROLOGIS 2, L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
 PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS: \_\_\_\_\_

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. PROLOGIS 2, L.P.  
Name of Limited Partnership or Limited Liability Limited Partnership

2. 07/30/2007 Date of filing/registration in Florida  
3. B07000000235 Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

NRAI Services, Inc.  
Name  
515 E. Park Avenue  
Address  
Tallahassee, FL 32301  
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company  
Name  
1201 Hays Street  
Florida street address (P.O. Box not acceptable)  
Tallahassee FL 32301  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Mark E. Jurgensen  
Signature of General Partner Name & Title: Mark E. Jurgensen, Asst. Secretary  
on behalf of AMB Property Holding Corporation, General Partner

*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 relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.*

By: Sarah Wright  
Signature of Registered Agent Sarah Wright, Asst. Vice President

Filing Fee: \$35.00  
Certified Copy (optional): \$52.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN 22 AM 10:20