

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-0393 FAX

800-342-8086



networks

PRESTICE HALL
LEGAL & FINANCIAL SERVICES

B95000000135

300001459343
-04/18/95--01100--002
*****52.50 *****52.50

ACCOUNT NO. : 072100000032

REFERENCE : 579222 6460A

AUTHORIZATION :

COST LIMIT : 9 PREPAID

ORDER DATE : April 13, 1995

ORDER TIME : 11:03 AM

ORDER NO. : 579222

CUSTOMER NO: 6460A

CUSTOMER: Jon C. Yergler, Esq
Lowndes Drosdick Doater
215 North Eola Drive

Orlando, FL 32801

m/c 4/13/95
G. TAX _____
FILING _____ 1752.00
R. AGENT FEE _____ 52.00
C. COPY _____ 52.50
TOTAL _____ 1837.50
N. BANK _____
BALANCE DUE _____
REFUND _____

FOREIGN FILINGS

300001459343
-04/18/95--01100--001
***1785.00 ***1785.00

NAME: WEEKS REALTY L.P.

____ PROFIT
____ NON-PROFIT

____ CORPORATE
XX LIMITED PARTNERSHIP

XX QUALIFICATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Maria I. Newport

FILED
SECRETARY OF CORPORATIONS
95 APR 13 PM 3:03

RECEIVED
95 APR 13 11:11:43
DIVISION OF CORPORATIONS

m/c 4/13/95

Florida Department of State, Jim Smith, Secretary of State

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

1. Weeks Realty, L.P.

(Name of limited partnership as it is in the home state)

2. Weeks Realty, L.P., a Georgia limited partnership

(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. Georgia

(State of Formation)

4. June 2, 1994

(Date of Formation)

5. Jon C. Yerger

(Name of Registered Agent for Service of Process)
c/o Lowndes, Drosdick, Foster, Kantor & Reed
215 North Eola Drive

6. _____

(Street Address of Registered Office)

Orlando

(City)

Florida 32802

(Zip Code)

7. Acceptance by the Registered Agent for Service of Process.

Jon C. Yerger
(Agent must sign on this line)

8. 4497 Park Drive, Norcross, Georgia 30093

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

SPECIFIC ADDRESS

Weeks Corporation

4497 Park Drive, Norcross, Georgia 30093

F-95000001804

10. 4497 Park Drive, Norcross, Georgia 30093

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION
95 APR 13 PM 3:03

Apr. 11, 1995 4:59PM - 111g 13d spelling

10.14074234405 No. 3643 P. 6/11

7/8

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.

12. 4497 Park Drive, Norcross, Georgia 30093
(Mailing Address of Limited Partnership)

This 11th day of April, 1995.

General Partner: WEEKS CORPORATION

By: Thomas D. Senkbeil
Title Vice Chairman/CFO

STATE OF GEORGIA

COUNTY OF GWINNETT

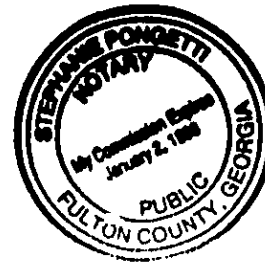
THE FOREGOING instrument was acknowledged and sworn to before me this 11th day

of April, 1995, by Thomas D. Senkbeil the Vice Chairman/CFO of

Weeks Corporation, the general partner of Weeks Realty, L.P. of Georgia
(Name of General Partner)
(Name of Limited Partnership)

Limited Partnership.

Stephanie Pongetti
Notary Public



State of Georgia at Large

(SEAL)

My Commission Expires: January 2, 1998

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

Thomas D. Senkbeil, the Vice Chairman / CIO of Weeks Corporation, a general partner of Weeks Realty, L.P., a (an) Georgia limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 70, 121, 266.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 15,000,000.

This 11th day of April, 1995.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

WEEKS CORPORATION, sole General Partner

By: Thomas D. Senkbeil

Title: Vice Chairman / Chief Investment Officer

State of GEORGIA

County of WINNETT

Date April 11, 1995

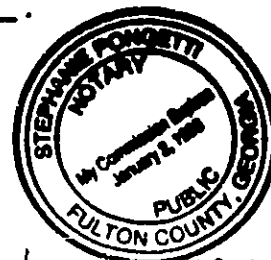
**/ Thomas D. Senkbeil, the Vice Chairman / CIO of

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared **/ Weeks Corporation (General Partner), known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership. the Vice Chairman of the

IN WITNESS WHEREOF I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 11th day of April, 1995.

Stephanie Pongetti
Notary Public

Seal



State of Georgia at Large

My commission expires: January 2, 1998

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 3:03

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Northern
Secretary of State
DIVISION OF CORPORATIONS

FILED

1995 NOV 21 PM 12: 44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
B95000000135

**WEEKS REALTY, L.P., A GEORGIA LIMITED
PARTNERSHIP**

Mailing Address

4497 PARK DRIVE
NORCROSS GA 30093

Principal Office Address

4497 PARK DRIVE
NORCROSS GA 30093

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA
04/13/1995

3a. Date of Last Report

4. State or Country of Formation
GA

5a. Capital Contributions as Shown
on Record.
\$15,000,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number

☒ Applied For
☐ Not Applicable

7. CERTIFICATE OF STATUS REQUIRED
**\$8.75 Additional Fee required
for a Certificate of Status**

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.183, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

YERGLER, JON C
C/O LOWMEDES, DROSDICK, ET AL
215 NORTH EOLA DRIVE
ORLANDO FL 32802

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

WEEKS CORPORATION

4497 PARK DRIVE

NORCROSS GA 30093

F95000001804

AR - \$437.50
SF - \$138.75

11-22-95 and

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Forrest W. Robinson

DATE

10/26/95

Typed or Printed Name of General Partner Signing Form

Weeks Corporation

By: Forrest W. Robinson, Pres.

Telephone Number

(970) 923-4076

**CORPORATE
ACCESS
INC.**

139500000135

WALK IN

PICK UP

10/31/96



☐ CERTIFIED COPY

☐ CUS

☐ PHOTO COPY

☒ FILING

Amend

1.) (CORPORATE NAME & DOCUMENT #)

2.) *Weeks Realty, L.P.*
(CORPORATE NAME & DOCUMENT #)

3.) (CORPORATE NAME & DOCUMENT #)

4.) (CORPORATE NAME & DOCUMENT #)

5.) (CORPORATE NAME & DOCUMENT #)

6.) (CORPORATE NAME & DOCUMENT #)

7.) (CORPORATE NAME & DOCUMENT #)

8.) (CORPORATE NAME & DOCUMENT #)

9.) (CORPORATE NAME & DOCUMENT #)

10.) (CORPORATE NAME & DOCUMENT #)

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
96 OCT 31 PM 4:10

000002003100--1

-11/13/96--01131--001

****105.00 ****105.00

RECEIVED
96 OCT 31 PM 1:50
DIVISION OF CORPORATIONS

C. TAX _____
FILING *52.50*
R. AGENT FEE _____
C. COPY *52.50*
TOTAL *105.00*
N. BANK _____
BALANCE DUE _____
REFUND _____

OK

10/31/96

SPECIAL INSTRUCTIONS

**CERTIFICATE OF AMENDMENT
TO
APPLICATION FOR REGISTRATION
OF**

FILED STATE
SECRETARY OF CORPORATIONS
96 OCT 31 PM 4:10

WEEKS REALTY, L.P.

(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.173, Florida Statutes, this foreign limited partnership hereby submits this certificate of amendment to its registration application:

The registration application is amended as follows:

1. That ~~the name of~~ the General Partner of the Partnership as set forth in Paragraph 9 of the Partnership's Application is hereby changed from "Weeks Corporation" to "Weeks GP Holdings, Inc." ~~F4500001804~~
2. That, except as changed, amended and modified hereby, the Partnership's Application shall remain in full force and effect in strict accordance with its terms.

WEEKS GP HOLDINGS, INC.
4497 PARK DRIVE
NORCROSS, GA 30093

A.R. Weeks, Jr.

(Signature of a General Partner)

A.R. Weeks, Jr.

(Typed or printed name of General Partner signing above)

STATE OF Georgia

COUNTY OF Gwinnett

On this 25 day of October, 1996, A.R. Weeks, Jr. personally appeared before me,

☒ who is personally known to me

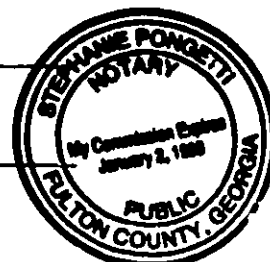
☐ whose identity I proved on the basis of _____

Stephanie Pongetti

(Notary Public Signature)

Stephanie Pongetti

(Notary's Printed Name)



Seal

My Commission Expires: January 2, 1998

B95000000135

100002057501--4

-01/14/97--01140--013

****628.00 *****52.50

53.25

8:36 AM

1/07/97

CORPORATE DETAIL RECORD SCREEN

NUM: B95000000135 ST:GA ACTIVE/FOREIGN LP FLD: 04/13/1995

LAST: AMENDMENT FLD: 10/31/1996

ACT CONT: 15,000,000.00 FEI#: APPLIED FOR

NAME : WEEKS REALTY, L.P., A GEORGIA LIMITED PARTNERSHIP

CROSS REF: WEEKS REALTY, L.P.

PRINCIPAL: 4497 PARK DRIVE

ADDRESS NORCROSS, GA 30093

RA NAME : YERGLER, JON C

RA ADDR : C/O LOWNDES, DROSDICK, ET AL

215 NORTH EOLA DRIVE

ORLANDO, FL 32802 US

ANN REP :

(1996) I 11/

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JAN -3 PM 3:41

1. MENU, 3. PARTNERS, 4. EVENTS

ENTER SELECTION AND CR:

Name	
Availability	
ocurrent	
Exempt	000
Holder	000
Verityer	0
Acknowledgement	000
W. P. Verifier	000

Changing
LSP

C. TAX _____
FILING _____
R. AGENT FEE _____
C. FEE _____
TAX _____
N. BANK _____
BALANCE DUE _____
REFUND _____

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF
WEEKS REALTY, L.P.

Pursuant to the provisions of section 620.109, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State April 13, 1995, adopts the following certificate of amendment to its certificate of limited partnership:

FIRST: Amendment(s):

The name of the general partner listed in Article 11 of the 1997 Limited Partnership Annual Report shall be deleted in its entirety and the following general partner shall be inserted in lieu thereof:

"Weeks GP Holdings, Inc."

F96000005575

SECOND:

This certificate of amendment shall be effective at the time of its filing with the Florida Department of State.

THIRD:

Signature of current general partner:

WEEKS CORPORATION

By: Forrest Robinson
Name: Forrest Robinson
Its: President / COO

Signature(s) of new general partner(s):

WEEKS GP HOLDINGS, INC.

ADDRESS:

By: Forrest Robinson
Name: Forrest Robinson
Its: President / COO

4497 Park Drive
Norcross, Georgia 30093

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 JAN -3 PM 3:41