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ACCOUNT NO. : 072100000032 REFERENCE : AUTHORIZATION COST LIMIT : \$ 160.00 ORDER DATE: August 30, 2004 ORDER TIME: 12:05 PM ORDER NO. : 8679,06-080 CUSTOMER NO: 4304394 CUSTOMER: Mr. Darryl Spivey Mayer Brown Rowe & Maw Suite 4000 190 South La Salle St. Chicago, IL 60603 FOREIGN FILINGS NAME: PROLOGIS ELKHORN GP LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY __ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER: _____

CONTACT PERSON: Troy Todd -- EXT#



August 31, 2004

TROY TODD CSC TALLAHASSEE, FL

SUBJECT: PROLOGIS ELKHORN GP LLC

Ref. Number: W04000033026



We have received your document for PROLOGIS ELKHORN GP LLC and the authorization to debit your account in the amount of \$160.00. However, the document has not been filed and is being returned for the following:

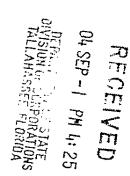
Please list the NAMES and ADDRESSES of the MANAGERS or MANAGING MEMBERS in Item 9.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 204A00052928



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 ProLogis Elkhorn GP LLC (Name of Foreign Limited Liability Company) 3. Applied for 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. July 16, 2004 (Duration: Year limited liability company will ceas (Date of Organization) exist or "perpetual") 6. Upon Filing (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 14100 E. 35th Place, Aurora, CO 80011 (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: MGRM Elkhorn Property Trust 14100 East 35th Place Aurora, CO 80011 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: Real estate investment 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.)

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.

0 777	14 71 11 4 4 11 64		
2. Ine name	and the Florida street address of the	e registered agent and office are.	The St.
	Corporation Service Compan	ny	THE SO
		(Name)	- Poston
	1201 Hays Street		100 · 100 ·
	- 1	P.O. Box NOT ACCEPTABLE)	
		20201	T'
	Tallahassee	FL 32301 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.

Corporation Service Company

By: Wellow M. Skipper

(Signature) Deborah D. Skipper

Asst. V. Pres.

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

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROLOGIS ELKHORN GP 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 THIRTIETH DAY OF AUGUST, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID_ "PROLOGIS ELKHORN GP LLC" WAS FORMED ON THE SIXTEENTH DAY OF JULY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Windson Songer of Street

AUTHENTICATION: 3323602

DATE: 08-30-04

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