

MO7000002721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

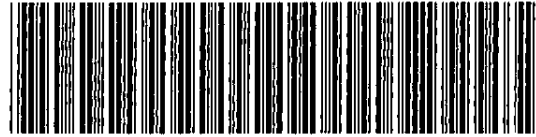
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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04/24/08--01012--009 \*\*25.00

FILED  
08 APR 24 AM 11:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. Collins APR 25 2008

CLAS Information Services  
2020 Hurley Way, Suite #350 Sacramento CA 95825  
Tel: (800) 447-6237

Job Number: 60510/JC

Date: April 21, 2008

**Name: AMB BEACON LAKES 9, LLC**

Request For: Florida  
TYPE OF FILING: Change of Agent

**Special Instructions:**

Please file the attached upon receipt. We have enclosed check #044860 in the amount of \$25.00 and a self-addressed, stamped envelope for your convenience in returning a stamped, filed copy to us. I have also attached the Power of Attorney for your records. Please call with any questions. Thank you in advance for your assistance.

Sincerely,

Judy Culver

Florida Department of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AMB BEACON LAKES 9, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUDY CULVER  
(Name of Person)

CLAS INFORMATION SERVICES  
(Firm/Company)

2020 HURLEY WAY, STE. 350  
(Address)

SACRAMENTO, CA 95825  
(City/State and Zip Code)

For further information concerning this matter, please call:

JUDY CULVER at ( 800 ) 447-6237  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT AMB Property Corporation, a Maryland corporation (the "Company"), and the indirect parent company of the entities listed on the attached schedule (the "Subsidiaries"), does hereby appoint representatives of National Registered Agents, Inc. (the "Representatives") as attorneys-in-fact for the Company and the Subsidiaries to act for the Company and the Subsidiaries and in the name of the Company and the Subsidiaries for the limited purposes authorized herein.

The Company having taken all necessary steps to authorize the changes and the establishment of this Power of Attorney, hereby grants the Representatives the power to execute the documents necessary to change the registered agent and registered office, or the agent and office of similar import, of the Company and the Subsidiaries in any jurisdiction in the United States.

In the execution of any documents necessary for the purposes set forth herein, the Representatives are hereby authorized to exercise the power of such office(s) and with such authority as is required to effect the changes herein contemplated on behalf of the Company and the Subsidiaries.

This Power of Attorney expires upon the completion and filing of the documents necessary to effect the changes in registered agent and registered office addresses contemplated herein, or when revoked by the Company.

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this 23<sup>rd</sup> day of August, 2006.

AMB Property Corporation

BY:



Tamra D. Browne, Senior Vice President,  
General Counsel and Secretary

State of California

County of San Francisco

Subscribed and sworn to (or affirmed) before me on this 23<sup>rd</sup> day of August, 2006, by Tamra D. Browne, personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(seal)

Signature

