

M090000001283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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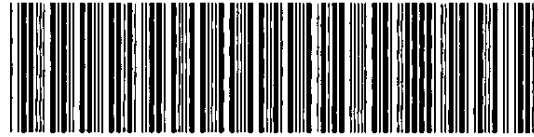
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 JUN -5 PM 1:41

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

09 JUN -5 PM 3:35

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUN - 5 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 027465 7143029

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : June 5, 2009

ORDER TIME : 11:02 AM

ORDER NO. : 027465-015

CUSTOMER NO: 7143029

FILED
09 JUN -5 PM 3:35
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: PROLOGIS MBC (1) LLC

XXX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT#2940

EXAMINER: _____

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: ProLogis MBC (1) LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: April 2, 2009

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? June 4, 2009
5. New name of the limited liability company: PLDCB LLC
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Edward S. Nekritz

Signature of a member or the authorized representative of a member

Edward S. Nekritz, General Counsel & Sec. of ProLogis,
Typed or printed name of signee the sole member

Filing Fee: \$25.00

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TALLAHASSEE
SECRETARY OF STATE
FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PROLOGIS MBC (1) LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "PLDCB LLC", THE FOURTH DAY OF JUNE, A.D. 2009, AT 9:13 O'CLOCK A.M.

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

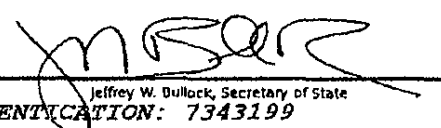
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROLOGIS MBC (1) LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2009.

4671708 8320

090591297

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7343199

DATE: 06-05-09