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J. BRYAN

DEC 17 2010.

EXAMINER

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT:	Duke Sample 1, LLC		_
	1	Name of Limited Liability Company	
		iability Company for Authorization to Transact Business is above referenced foreign limited liability company to tra	
Please return	n all correspondence concerning this	matter to the following:	
•	Beth Talbott		
		Name of Person	
	Duke Realty Corporatio		<u> 50</u> 5
		Firm/Company	CCAFE CCAFE
	600 E. 96th St., Suite	100	AS.
		Address	THE P IT
	Indianapolis, IN 46240		DEC 16 AM III: 48
		City/State and Zip Code	€ ~
	beth.talbott@dukere	ealty com	
	E-mail address	s: (to be used for future annual report notification)	
For further i	information concerning this matter, p	lease call:	
Be	eth Talbott	at (317) 808-6393	<u>.</u>
	Name of Person	Area Code & Daytime Telephone Number	
Div Re P.C	vision of Corporations gistration Section D. Box 6327 Ilahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	•
	is a check for the following am 25.00 Filing Fee \$\int_\$	Fee & \$\Bigsim\$155.00 Filing Fee & \$\Bigsim\$160.00 Filing Fee	

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:

LIVITED HADILITI COMPANT TO TRANSACT DUSINESS IN THE STATE OF FLORIDA:
Duke Sample 1, LLC
(Name of Foreign Limited Liability Company; must include "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 include "Limited Liability Company," "L.L.C," "LLC.")
Company, L.L.C, LLC.)
2. Delaware 3. applied for
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. December 10, 2010 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to
(Date of Organization) (Director, Feat mined flagmity company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
₇ 600 E. 96th St., Suite 100
Indianapolis, IN 46240
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
SE OF L
9. The name and usual business addresses of the managing members or managers are as follows:
9. The name and usual business addresses of the managing members or managers are as follows:
Duke Realty Limited Partnership
600 E. 96th Street, Suite 100
Indianapolis, IN 46240
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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Own, manage, improve,
operate, finance, lease, hold and sell certain real estate
James C. Je
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

Typed or printed name of signee

penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

David P. Durm, Vice President, Legal & Asst. Secretary

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.

1. The name of t	he Limited Liability Company is:			
Duke Samp	ole 1, LLC			
If unavailable, th	e alternate to be used in the state of Flori	ida is:		
2. The name and	the Florida street address of the register			
Ć	CT Corporation System (Name)	CT Corporation System NOT ACCEPTABLE) 33324	10 DEC 16	ederen in
1	200 South Pine Island Road c/o (Florida Street Address (P.O. Box.)	CT Corporation System NOT ACCEPTABLE)	S AM II:	
	Plantation FL 3		9	

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.

James M. Halpin

Assistant Secretary

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DUKE SAMPLE 1, 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 THIRTEENTH DAY OF DECEMBER, A.D. 2010.

SECRETARY OF STATE

4911580 8300

101171742

Jeffrey W. Bullock, Secretary of State

AUTHENTY, CATION: 8422282

DATE: 12-13-10

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