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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: DP Weston Pointe I, LLC			
Name of Limited Liability Company			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please return all correspondence concerning this matter to the following:			
Beth Talbott			
Name of Person			
Duke Realty Corporation			
Firm/Company			
600 E. 96th St., Suite 100			
Address			
Indianapolis, IN 46240			
City/State and Zip Code			
beth.talbott@dukerealty.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Beth Talbott at (317) 808-6393			
Name of Person Area Code & Daytime Telephone Number			
MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations			
Registration Section Registration Section			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\int_{\text{\$125.00 Filing Fee}}^{\text{\$130.00 Filing Fee}} \int_{\text{\$Certificate of Status}}^{\text{\$135.00 Filing Fee}} \int_{\text{\$Certified Copy}}^{\text{\$155.00 Filing Fee}} \int_{\text{\$Certified Copy}}^{\text{\$160.00 Filing Fee}}, \text{\$Certified Copy}			

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. DP Weston Poin	te I, LLC	
(Name of Foreign L	mited Liability Company; must include "Limited Liab	ility Company," "L.L.C.," or "LLC.")
	alternate name adopted for the purpose of transacting managing members adopting the alternate name. The ")	
2. Delaware (Jurisdiction under the la company is organized)	w of which foreign limited liability 3.	(FEI number, if applicable)
4. January 20, 2011 (Date of C	Organization) 5. Perpetual (Duration: Yexist or "per	ear limited liability company will cease to petual")
6.		
	(Date first transacted business in Florida, if prior to r See sections 608.501 & 608.502 F.S. to determine per	egistration.) alty liability)
7 600 E. 96th St.,	•	•
Indianapolis, IN 4	6240	
	(Street Address of Principal Office	ce) w
8. If limited liability co	ompany is a manager-managed company, che	ck here ☐ SSE = E
9. The name and usual	business addresses of the managing member	s or managers are as follows:
Duke/Princeton,	LLC	DF 6
600 E. 96th St.	Suite 100	
Indianapolis, Il	N 46240	
the jurisdiction under the law	rtificate of existence, no more than 90 days old, duly auth of which it is organized. (A photocopy is not acceptable inder oath of the translator must be submitted.)	• • • • • • • • • • • • • • • • • • • •
11. Nature of business	or purposes to be conducted or promoted in	Florida: any and all lawful
business activitie	s as are permitted in the State of Floric	la for limited liability companies
(In accorda penalties documen	DUKE/PRINCETON, LLC, a Delaware limited liability company, its sole member By: Duke/Hulfish, LLC, a Delaware limited liability compa By: Duke Realty Limited Partnership, an Indiana limited Partnership, its managing me By: Duke Realty Corporation, an Indiana corporation, its general partner By: Ann C. Dee,	irmation under the

Senior Vice President, Legal

and Deputy General Counsel

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 the Limited Liability Company is:				
DP Weston Pointe I, LLC				
If unavailable, the alternate to be used in the state of Florida is:				
2. The name and the Florida street address of the registered agent and office are:				
CT Corporation System				
(Name)				
1200 South Pine Island Rd. c/o CT Corporation System Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Plantation FL 33324 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.

James M. Halpin
(Signature) 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)



PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "DP WESTON POINTE I, 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 TWENTY-FIRST DAY OF JANUARY, A.D. 2011.

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110065118

AUTHENTY CATION: 8509052

DATE: 01-21-11

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