#### Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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: C T CORPORATION SYSTEM Account Name

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### Foreign Limited Liability Company Colonial Central 400, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

#### COVER LETTER

TO;	Registration Section Division of Corporations	
SUBJI	ECT: COLONIAL CENTER 400, LLC	
	Name of Limited Liability Company	
The en Exister	nclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate nee, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.	of la.
Please	return all correspondence concerning this matter to the following:	
	Thomas A. McKean, Associate General Counsel	
	Name of Person	
	Piedmont Office Realty Trust, Inc.	
	Firm/Company	
	11695 Johns Creek Parkway. Suite 350	
	Address	
	Johns Creck, GA 30097	
	City/State and Zip Code	
	lori,howard@piedmontreit.com	
	E-mail address: (to be used for future annual report notification)	
For tu	rther information concerning this matter, please call:	
	Thomas A. McKean at (770 ) 418-8611	
	Name of Person Area Code & Daytime Telephone Number	
	MAILING ADDRESS:  Division of Corporations  Registration Section  P.O. Box 6327  Tallahassee, FL 32314  Citton Building  Tallahassee, FL 32301	
	sed is a check for the following amount:  S125.00 Filing Fee S130.00 Filing Fee & S160.00 Filing Fee, Certificate Of Status  Certified Copy  S155.00 Filing Fee & Of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LĐ	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
١.	Calonial Center 400, LLC		
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the vasem of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabilionpany," "L.L.C," "LLC.")	writter Ty	1
<b>2</b>	Delaware		
	Dolaware   3.   (Jurisdiction under the law of which foreign limited liability company is organized)   (FEI number, if applicable)		
4.	August 24, 2011 5. Perpetual		
	(Date of Organization)  (Date of Organization)  (Duration: Year limited liability company will cease to exist or "perpetual")		
6.	Upon qualification		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7.	11695 Johns Creck Parkway, Suite 350		
	Johns Creek, CiA 30097		
	(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:		
	Piedmont Operating Partnership, LP		
	11695 Johns Creek Parkway, Suite 350		
	Johns Creek, GA 30097		
the	t. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rexe purisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under outh of the translator must be submitted.)	onds in	l
11	. Nature of business or purposes to be conducted or promoted in Florida:		
	Acquire and manage commercial real estate		
		₹ >-	
	penalties of periory that the facts stated herein are true I am aware that any false information submitted late.	25	218
•	Thomas A. McKean, Secretary		1
	Typed or printed name of signee		jj wan

## 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.

Colonial Cente	or 400, LLC
If unavailabl	e, 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:
	C T Corporation System
	C T Corporation System
	C T Corporation System (Name)
	C T Corporation System : (Name) 1200 South Pine Island Road

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.

CT Corporation System

Ternell Kearney Asst. Secretary

(Signature)

\$ 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

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "COLONIAL CENTER 400, 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-FIFTH DAY OF AUGUST, A.D. 2011.

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

5028893 8300

110953562

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

jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 8992393

DATE: 08-25-11