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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
A
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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A. LUNT
W14-7880
W17 /00°

Office Use Only



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TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE



ON SERVICE COMPANY
ACCOUNT NO. : 12000000195
REFERENCE : 992037 4327719
AUTHORIZATION: STREET CONTROLLERAND
COST LIMIT : \$ 125 00
ORDER DATE : February 5, 2014
ORDER TIME : 1:04 PM
ORDER NO. : 992037-005
CUSTOMER NO: 4327719
FOREIGN FILINGS
NAME: PREHC GAVI WESTPOINT
DISTRIBUTION CENTER, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:



February 6, 2014

RESUBMIT

CSC ATTN: SUSIE KNIGHT Please give original submission date as file date.

SUBJECT: PREHC GAVI WESTPOINT DISTRIBUTION CENTER, LLC

Ref. Number: W1400007880

We have received your document for PREHC GAVI WESTPOINT DISTRIBUTION CENTER, LLC. However, the document has not been filed and is being returned for the following:

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt Regulatory Specialist II

Letter Number: 014A00002729



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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RI LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	3GISTER .	A FOREIGN
1. PREHC GAVI Westpoint Distribution Center, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "L Company," "L.L.C," "LLC.")	a copy of imited Li	the written iability
2. Delaware 3.		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	ALLA	2014 FEB
4. (Date first transacted business in Florida, if prior to registration.)		_ E
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	SS	å F
5. PREHC GAVI Westpoint Distribution Center, LLC	H. J.	-5 A
711 High Street, Des Moines, Iowa 50392	STA LOR	5 0
(Street Address of Principal Office)	হুল	~~~
6. PREHC GAVI Westpoint Distribution Center, LLC		
801 Grand Avenue, Des Moines, Iowa 50392		
(Mailing Address)		
7. The name, title or capacity and address of the person(s) who has/have authority to manage	e is/are	
Principal Real Estate Investors, LLC AR.		
801 Grand Avenue, Des Moines, Iowa 50392		
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fore translation of the certificate under oath of the translator must be submitted.)		
See attached signature page		
Signature of an authorized person		
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true. I am aware that any false information submitted document to the Department of State constitutes a third degree felony as provided for in s.817.1	ted in a	
Typed or printed name of signee		

PRINCIPAL REAL ESTATE INVESTORS, LLC, a Delaware limited liability company, its authorized signatory

Ву:

Que D 3000m

Name: Title: DENNIS D. BALLARD, Counsel

Ву:

Name: Title:

ALAN P. KRESS, Counsel

DECRETARY OF STATE-TALLAHASSEE, FLORID,

TEMO

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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	of the Limited Liability Company is:		
PREHC GAVI	WESTPOINT DISTRIBUTION CENTER, LLC		_
If unavailable,	, the alternate to be used in the state of Florida is:		
2. The name a	and the Florida street address of the registered agent and office are:	2014 FES SCRED SALLAHA	-
	Corporation Service Company	HASS	
	(Name)	CH C	
	1201 Hays Street	Raio 27 DF STATE J. FLORIO	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee 32301		
	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 605, Florida Statutes.

Corporation Service Company

By:

(Signature)

Sue G. Knight

Assistant Vice President

\$ 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 "PREHC GAVI WESTPOINT DISTRIBUTION

CENTER, 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 FIFTH DAY OF

FEBRUARY, A.D. 2014.

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 "PREHC GAVI WESTPOINT DISTRIBUTION CENTER, LLC" WAS FORMED ON THE NINTH DAY OF DECEMBER, A.D. 2013.

5445483 8300

140134224

AUTHENTICATION: 1111496

DATE: 02-05-14

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