

M14000001341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

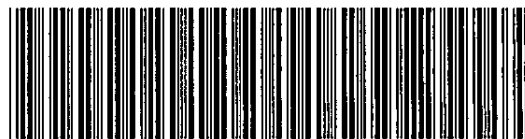
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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B. BOSTICK

FEB 27 2014

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 027183 7593518

AUTHORIZATION

COST LIMIT : \$ 160.00

ORDER DATE : February 25, 2014

ORDER TIME : 3:13 PM

ORDER NO. : 027183-020

CUSTOMER NO: 7593518

FOREIGN FILINGS

NAME: EXETER FLORIDA I, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_\_\_\_ CERTIFIED COPY  
\_\_\_\_\_ PLAIN STAMPED COPY  
XX \_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

FILED  
MAR 25 2014  
USCA 52 114183

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Exeter Florida 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:

Brian Fogarty, Esquire

Name of Person

Exeter Property Group

Firm/Company

140 W. Germantown Pike, Suite 150

Address

Plymouth Meeting, PA 19462

City/State and Zip Code

bfogarty@exeterpg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tiffany Markoski

Name of Person

at ( 610 )

Area Code

263-0125

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☒ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Exeter Florida I, 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.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

4. N/A

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 140 W. Germantown Pike, Suite 150

Plymouth Meeting, PA 19462

(Street Address of Principal Office)

6. 140 W. Germantown Pike, Suite 150

Plymouth Meeting, PA 19462

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Exeter Operating Partnership II, L.P. , Sole member

140 W. Germantown Pike, Suite 150

Plymouth Meeting, PA 19462

8. 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 oath of the translator must be submitted.)

*See attached*

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the 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.)

See attached signature page

Typed or printed name of signee

**SIGNATURE PAGE TO APPLICATION BY FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN FLORIDA**

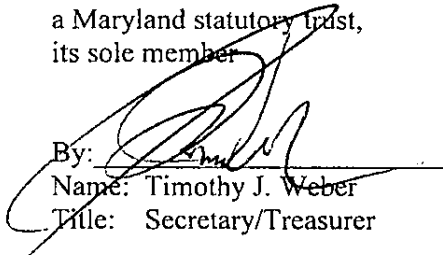
**EXETER FLORIDA I, LLC**

**SOLE MEMBER:**

EXETER OPERATING PARTNERSHIP II, L.P., a Delaware  
limited partnership,

By: Exeter Operating Partnership II GP LLC,  
a Delaware limited liability company,  
its sole general partner

By: Exeter Industrial REIT II,  
a Maryland statutory trust,  
its sole member

By:   
Name: Timothy J. Weber  
Title: Secretary/Treasurer

FILED

2014 (C) 25 A 9:50

CLERK OF COURT

**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 the Limited Liability Company is:

Exeter Florida 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:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL

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)

RECEIVED  
SEP 25 4 00 PM '00

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EXETER FLORIDA 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 TENTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EXETER FLORIDA I, LLC" WAS FORMED ON THE THIRD DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED  
2014 FEB 25 A 9:50  
DELAWARE

5193668 8300

140153035

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1122017

DATE: 02-10-14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 26, 2014

CSC  
EXETER FLORIDA I, LLC  
SUSIE KNIGHT

SUBJECT: EXETER FLORIDA I, LLC  
Ref. Number: W14000012535

**RESUBMIT**  
Please give original  
submission date as file date.

2014 FEB 25 A 9:50

FILED

We have received your document for EXETER FLORIDA I, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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), Authorized Person (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.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 314A00004280

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