

MS000003650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

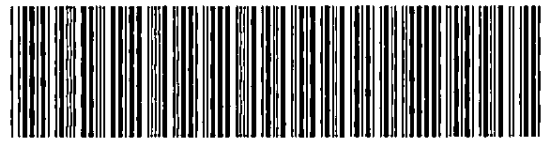
(Business Entity Name)

(Document Number)

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2018 NOV 29 PM 7:16


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2018 NOV 29 PM 1:52

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

11/30/18 DS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 504530 7143029  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

ORDER DATE : November 27, 2018  
ORDER TIME : 10:03 AM  
ORDER NO. : 504530-025  
CUSTOMER NO: 7143029

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FOREIGN FILINGS

NAME: PROLOGIS USLV TRS SUB 1, LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

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

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Prologis USLV TRS Sub 1, LLC  
\_\_\_\_\_  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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2019 NOV 29 P 7:16

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Prologis USLV TRS Sub 1, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

May 18 2015

(Date registered with Florida Department of State)

M15000003850

(Florida Document Number)

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NOV 21 P 7:16

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Michael T. Blair, Managing Director & Assistant Secretary of Prologis, Inc., the general partner of Prologis, L.P., the general partner of Prologis USLV

(Typed or printed name of signee)

Operating Partnership, L.P., the sole member of Prologis USLV TRS 1, LLC, the sole member of Prologis USLV TRS Sub 1, LLC

**Filing Fee: \$25.00**