# M1500003854

(Re	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ru	siness Entity Nar	ne)
(Du	siness Entity Mar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	





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FILED
15 HAY 18 PH 12: 32
SECRETARY OF STATE

1000 = 110115

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

111 11 11 1

ACCOUNT NO. : I2000000195

REFERENCE : 630117 7143029

AUTHORIZATION : THE COMMENT

COST LIMIT : \$ 125.00

ORDER DATE: May 14, 2015

ORDER TIME : 11:52 AM

ORDER NO. : 630117-020

CUSTOMER NO: 7143029

#### FOREIGN FILINGS

NAME: PROLOGIS USLV TRS SUB 4, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

### 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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Dealerie UCLVITES Co. t. 4.11.0		
Prologis USLV TRS Sub 4, LLC	<u>(                                    </u>	<del></del>
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL	.C. )	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name r Liability Company," "L.L.C," or "LLC.")	nust includ	de "Limited
Delaware		
2. (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)		<del></del>
Upon Filing		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
<sub>5.</sub> 4545 Airport Way		
Denver, Colorado 80239		
(Street Address of Principal Office) 5. 4545 Airport Way		
		<del></del>
Denver, Colorado 80239  (Mailing Address)		····
7. The name, title or capacity and address of the person(s) who has/have authority to manage	ge is/are	:
Prologis USLV TRS 1, LLC (sole member)		<del> </del>
4545 Airport Way		
Denver, Colorado 80239		
B. Attached is an original certificate of existence, no more than 90 days old, duly authenticat naving custody of records in the jurisdiction under the law of which it is organized. (A photo acceptable. If the certificate is in a foreign language, a translation of the certificate under oat must be submitted)	copy is	not
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	SECRETAR ALLAMASS	15 MAY 18
m aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for	ing 817,155	ed herein are true.
Michael T. Blair	1.05 VIS	ਲ਼ ਲ਼ ਲ਼
Typed or printed name of signee	F1 62	3 2

### 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:	
Prologis USLV	TRS Sub 4, LLC		
If unavailable,	the alternate to be used	d in the state of Florida is:	
2. The name a	and the Florida street ac	ddress of the registered agent and office are:	
	Corporation Service Company		
	(Name)		_
	1201 Hays Street		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		_
	Tallahassee	32301 FL	
		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.

S 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 "PROLOGIS USLV TRS SUB 4, 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 FIFTEENTH DAY OF MAY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROLOGIS USLV TRS SUB 4, LLC" WAS FORMED ON THE FOURTEENTH DAY OF MAY, A.D. 2015.

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

15 MAY 18 PM 12: 32
SECRETARY OF STATE
ALL AMASSEF, FLORIBLE

5747164 8300

150687785

1 3 4 4 4 F

AUTHENTY CATION: 2382108

DATE: 05-15-15

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