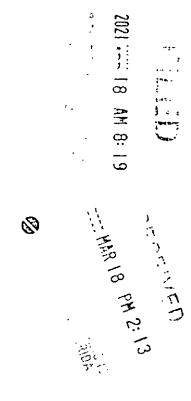
M2000000446

(Re	equestor's Name)			
(Ad	ldress)			
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PICK-UP	MAIT	MAIL		
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O SIMMONS MAR 1 9 2021 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : AUTHORIZATION COST LIMIT : \$ 25.00 ORDER DATE: March 17, 2021 ORDER TIME : 11:40 AM ORDER NO. : 717329-005 CUSTOMER NO: 7143029 FOREIGN FILINGS NAME: PROLOGIS-EXCHANGE BEACON LAKES 46 LLC CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX ___ PLAIN STAMPED COPY ____ CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#

COVER LETTER

	tration S on of C	ection orporations		
F SUBJECT: _	Prologis	-Exchange Beacon La	kes 46 LLC	
30 13 1011		(Name of Fo	reign Limited Liability (Company)
Dear Sir or Ma	ıd a m:			
The enclosed v	withdrav	val and fee(s) are submitt	ed for filing.	
Please return a	ill corre	spondence concerning thi	s matter to the following	;
Marilyn Cart	wright			
		(Name of Person)		•
Prologis, Inc				
		(Firm/Company)		-
1800 Wazee	e St., Si	uite 500		
		(Address)		
Denver, CO	80202			_
		(City/State and Zip Co	ode)	
For further in	formatio	on concerning this matter.	, please call:	
Marilyn Carl	wright		303 at (567-5484
	(Na	me of Person)	(Area Code &	Daytime Telephone Number)
Reg Div P.O	ision o	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a	check	for the following amout	ıt:	
□\$25 Filing	; F ee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	\$60 Filing Fee,Certificate of Status &Certified Copy

2021:---18 AM 8: 19

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Prologis-Exchange	Beacon Lakes 46 LLC
	(Name of limited liability company)
Delaware	
	(Jurisdiction of its organization)
October 21, 2020	
· · · · · · · · · · · · · · · · · · ·	(Date registered with Florida Department of State)
M20000009446	
	(Florida Document Number)
This limited liabili	ty company is withdrawing its certificate of authority in this state.
(If an effective date more than 90 days Note: If the date in	nserted in this block does not meet the applicable statutory filing requirements, we listed as the document's effective date on the Department of State's records.
Ma 	(Signature of authorized representative) rilyn Cartwright, Authorized Person (Typed or printed name of signee)

Filing Fee: \$25.00