5/20/2016 11:02:44 AM M: (Tol. 8506186388 18) 60 4057

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Foreign Limited Liability Company Jacksonville Bronco LLC

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5/20/2016 11:02:44 AM From: To: 8506176383(2/4)

COVER LETTER

TO :	Regis Divis	stration Section ion of Corporatio	ns				
SUBJEC		IACKSONVILLE	BRONCO LLC				
301000			Name of	Limited Liability	Company		
						ansact Business in Florida," C y company to transact busine	
Please ret	ium a	li correspondence	concerning this matter to the	following:			
		Stephanie Brig	gs				
			N	lame of Person			
		Aspen Square	Management, Inc.				
			F	irm/Company	, 		
	380 Union Street, Suite 300						
				Address		······································	
	West Springfield, MA 01089 City/State and Zip Code						
		stephanie_briggs	@aspensquare.com		•		
			E-mail address: (to be use	d for future annua	report not	ification)	
For furthe	r info	rmation concernin	g this matter, please call:				
5	Steph	anic Briggs		413 at (439-63		
~	•	Name o	f Contact Person	Area Code	Day	time Telephone Number	
R P	Divisi Regist P.O. E	JNG ADDRESS: on of Corporations ration Section 80x 6327 assee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding centive Center Circle ice, FL 32301	
		heck for the follow 5.00 Filing Fee	ing amount: \$\Pi\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	_	☐ \$160.00 Filing Fcc, Cert of Status & Certified Copy	ificate

5/20/2016 11:02:44 AM From: To: 8506176383(3/4)

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 ID TRANSACT RESIDENCE IN THE STATE OF FLORIDA.

COMPANY TO TRANSACT BE	USINESS IN THE STATE OF FLORIDA:		
, JACKSONVILLE BR	ONCO LLC		
(Name of For	eign Limited Liability Company; must include "Lin	ited Liability Company," "L.L.C.," o	or "ULC.")
(If name unavallable, enter a Liability Company," "L.L.C.	Iternate name adopted for the purpose of transacting " or "LLC.")	business in Florida. The alternate na	une must include "Limited
2. Delaware	3	8) - 208 3389 (FEI number, if applicable	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	2)
1			
 	(Date first transacted business in Florida, it (See sections 605.0904 & 605.0905, F.S. to d	f prior to registration.) etermine penalty liability)	
380 Union Street, Suit			_
West Springfield, MA	01089		
	(Street Address of Principal Office)	
380 Union Street, Suite	300		
West Springfield, MA	01089		200
	(Mailing Address)		- XX 0 10
7. Name and street address	ss of Florida registered agent: (P.O. Box NOT	_acceptable)	
Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida 33324 (Zip code)	هيمه
	(City)	(Zip code)	-
esignated in this application complywith the provision complywith the provision coept the obligations of n	gistered agent and to accept service of process tion, I hereby accept the appointment as registons of all statutes relative to the proper and composition as registered agent. C T Corporation System	tered agent and agree to act in th	his capacity. I further agree
	By: Colar	u Bura-	_
	(Registered agent's sig	nature) QRcgi	
3. The name, title or capa Nepsa Manager LLC, Mai	city and address of the person(s) who has/have nager	authority to manage is/are:	
80 Union Street, Suite 30	00		
Vest Springfield, MA 010	989		
444.3.3.3			
risdiction under the law of the translator must be su	of existence, no more than 90 days old, duly au of which it is organized. (If the certificate is in a bmitted) BRONCO (N.C by Nopsa Manager LLC, its Mana	a foreign language, a translation o	of the certificate under oath
	Signature of an authorized	i person	-
hia dogumana ia accessora	()	•	u falan information
	in accordance with section 605.0203 (1) (b), FI the Department of State constitutes a third degree	ree felony as provided for in s.817	.155, F.S.
	Jevenn	Pava, Treasura	<u>:</u>
	Typed or printed name of	ignee	

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JACKSONVILLE BRONCO 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 NINETEENTH DAY OF MAY, A.D. 2016.

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

Authentication: 202349116

Date: 05-19-16

6046357 8300 SR# 20163441711

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