# M05000004671

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ACCOUNT NO. : 072100000032

REFERENCE : 555840 4304937

AUTHORIZATION

COST LIMIT

ORDER DATE: August 22, 2005

ORDER TIME : 2:41 PM

ORDER NO. : 555840-005

CUSTOMER NO: 4304937

CUSTOMER: Anne T. Leland, Legal Asst

Mintz, Levin, Cohn, Ferris, One Financial Center

Boston, MA 02111

#### FOREIGN FILINGS

NAME: PARK LAKE AT PARSONS LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:

ZATION TO

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Park Lake at Parsons LLC	
(Name of Foreign L	inited Liability Company)
Delaware (Jurisdiction under the law of which foreign limited lic company is organized)	3
(Date of Organization)	5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
Upon Filing (Date first transacted busine (See sections 608.501 & 608.	ss in Florida, if prior to registration.) 502 F.S. to determine penalty liability)
2150 Washington Street, Newton, MA	02462
(Street A	Address of Principal Office)
If limited liability company is a manager-ma	anaged company, check here
Northland Investment Corporation, Sole Member	2150 Washington Street, Newton, MA 02462 -
	<u> </u>
e jurisdiction under the law of which it is organized. (A parallation of the certificate under outh of the translator mus	•
1. Nature of business or purposes to be condu	acted or promoted in Florida: Hold title to real

Mark P. Consoli, Treasurer of Northland Investment Corporation - Sole Member
Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, 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 Con	mpany is:	
Park Lake a	t Parsons LLC		
2. The name	and the Florida street addre	ess of the registered agent and office are	<b>::</b>
	Corporation Service	Company	
		(Name)	
	1201 Hays Street	<u> </u>	
	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 608, Florida Statutes.

By: 1. (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PARK LAKE AT PARSONS 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 TWENTY-FIFTH DAY OF JULY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PARK LAKE AT PARSONS LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF JULY, A.D. 2005.

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



Varriet Smith Hindson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4044990

DATE: 07-25-05

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