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| (Re                       | questor's Name)  |                 |  |  |
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| (Cit                      | y/State/Zip/Phon | <del>e</del> #) |  |  |
| PICK-UP                   | WAIT             | MAIL            |  |  |
| (Business Entity Name)    |                  |                 |  |  |
| (Document Number)         |                  |                 |  |  |
| Certified Copies          | _ Certificates   | s of Status     |  |  |
| Special Instructions to I | Filing Officer:  |                 |  |  |
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#### COVER LETTER

|  | on of Corporations  |   |  |  |
|--|---|---|--|--|
| SUBJECT:   |   | Revitalization, LLC ted Liability Company)  |  |  |
| Florida," Cert   |   | bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited |  |  |
| Please return  | all correspondence concerning this m  | atter to the following:   |  |  |
| Julie Herbst Peabody, Esq.                                   |   |   |  |  |
|  | (Nai  | ne of Person)   |  |  |
| Krokidas & Bluestein LLP                                     |   |   |  |  |
| (Firm/Company)   |   |   |  |  |
| 600 Atlantic Avenue  |   |   |  |  |
| (Address)  |   |   |  |  |
|  | Boston, MA  |   |  |  |
| (City/State and Zip Code)                                    |   |   |  |  |
| For further information concerning this matter, please call: |   |   |  |  |
|  | Jeffrey K. Lines  | at (781) _551-8801  |  |  |
|  | (Name of Person)  | (Area Code & Daytime Telephone Number)  |  |  |
| MAII   | ING ADDRESS:  | STREET ADDRESS:   |  |  |
| Divisi   | on of Corporations  | Division of Corporations  |  |  |
| P.O. E   | 30x 6327  | Clifton Building  |  |  |
| Tallah   | assee, FL 32314   | 2661 Executive Center Circle Tallahassee, FL 32301  |  |  |
|  | check for the following amount:  5.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of }\text{Certificate of }\text{S130.00 Filing Fee & Certificate of }\text{S130.00 Filing Fee }S | \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate  |  |  |

### 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Pompano Beach Revitalization, LLC (Name of Foreign Limited Liability Company) . Massachusetts
(Jurisdiction under the law of which foreign limited liability company is organized) 4. <u>December 7. 2005</u> (Date of Organization) Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 511 Washington Street, Suite 101 Norwood, MA 02062 (Street Address of Principal Office) 8. If limited fiability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Jeffrey K. Lines 511 Washington Street, Suite 101 Norwood, MA 02062 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Consulting Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes

an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

<u>Jeffrey K. Lines</u>

## 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.

| l. | The name of the Limited Liability Company is:                                   |              |
|----|---|--------------|
| _  | Pompano Beach Revitalization, LLC   | <del></del>  |
| 2. | The name and the Florida street address of the registered agent and office are: | SECRETALLAHA |
|    | William Grindl (Name)   | SSEE, FL     |
|    | 204 North Village Street  Florida Street Address (P.O. Box NOT ACCEPTABLE)      | ORIDA        |
|    | Celebration, FL 34747 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.

Weller (Signature) William Grindl.

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



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

William Francis Galvin Secretary of the Commonwealth

December 7, 2005

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

#### POMPANO BEACH REVITALIZATION, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on December 7, 2005.

I further certify that no amendment to said certificate of organization has been filed; that, said Limited Liability Company has not filed a certificate of cancellation; and that, so far as appears of record, said Limited Liability Company has legal existence.

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

