# 07000005406

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	• #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



20010591186230.00

LEO J. CUSHING KEVIN N. DOLAN

\*ALSO ADMITTED NEW HAMPSHIRE BAR

\*\*ALSO ADMITTED PENNSYLVANIA BAR

\*\*\*ALSO ADMITTED LOUISIANA BAR

\*\*\*\*ALSO ADMITTED RHODE ISLAND BAR

Cushing & Dolan, P.C.

ATTORNEYS AT LAW
24 SCHOOL STREET
SUITE 300
BOSTON, MA 02108-5113
Tel. (617) 523-1555
FAX (617) 523-5653

EMAIL: LCUSHING@CUSHINGDOLAN.COM WWW.CUSHINGDOLAN.COM

\*ANN M. CUSHING GLEN F. SUTHERLAND \*\*TODD E. LUTSKY \*\*\*MARGARET L. CROSS MICHAEL P. FLEMING JENNIFER L, LAUCIRICA JANICE A. WILSON ANNMARIE HEAVEY PAULA C. BARTLETT \*\*\*\*MATTHEW S. GREEN JASON M.WOODWARD JULIE M. PALMACCIO MICHAEL T. BAKER BRIAN E. HAMMELL CAITLIN E. CONRY JOHN J CATINO

August 29, 2007

#### **VIA: FEDERAL EXPRESS**

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: J & D Horan Series, LLC

Dear Sir or Madam:

Please find enclosed the following in connection with J & D Horan Series, LLC, together with a check in the amount of \$130.00.

- 1. Certificate of Legal Existence and Good Standing issued by the State of Delaware;
- 2. Cover Letter:
- 3. Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida; and
- 4. Certificate of Designation of registered Agent/Registered Office.

Once you have filed the foregoing documents, please send me a Certificate of Status. I have enclosed a prepaid envelope for your convenience.

Please contact me if you have any questions. Thank you.

Very truly yours,

Paula Bartlett

Enclosures

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: J & D HORAN SERIES, LLC (Name of Limit	ited Liability Company)	
	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:	
LEO J. CUSHING, ESQ.		
(Na	me of Person)	
CUSHING & DOLAN, P.C.		
(Fir	m/Company)	
24_SCHOOL_STREET, SUITE 30	me of Person)  SEP -6 AM II: 07  M/Company)  O COSTC COMPANY  (Address)	
BOSTON, MA 02018		
(City/Sta	ate and Zip Code)	
For further information concerning this matter, plea	ase call:	
LEO J. CUSHING (Name of Person)	at (617 ) 523-1555 (Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations  Division of Corporations		
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\Bigsim \\$125.00 \text{ Filing Fee} \Bigsim \\$130.00 \text{ Filing Fee & Certificate of }	□\$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:

1.	J & D HORAN SERIES, LLC (Name of Foreign Limited Liability Company)	
	(Name of Foreign Limited Liability Company)	
2.	DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized)  3. 26-0725317 (FEI number, if applicable)	
4.	(Date of Organization)  5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")	
6.		
σ.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  125 SIMPSON STREET, STOUGHTON, MA 02072	
7.	max or	- וריי וריי
	(Street Address of Principal Office)	ζ
8.	(Street Address of Principal Office)  If limited liability company is a manager-managed company, check here \( \text{X} \)	
9.	The name and usual business addresses of the managing members or managers are as follows:	
	JAMES M. HORAN, MANAGER 125 SIMPSON STREET, STOUGHTON, MA 02072	
thx	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recore jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.)	rds in
11	. Nature of business or purposes to be conducted or promoted in Florida:	
	ACQUIRE, OWN AND LEASE REAL ESTATE  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	

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.

TALLARIN
SSE E
M 11: 07
r

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.

(Signature)

The name of the Limited Lightlity Commons in

\$ 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, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "J & D HORAN SERIES, 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 SEVENTEENTH DAY OF AUGUST, A.D. 2007.



Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 5935554

DATE: 08-17-07

**44**09309 8300 070933750