M080000

		~
(Re	equestor's Name)	
(Address)		
(Address)		
(, , ,		
		,
(Cit	ty/State/Zip/Phone	e #)
		П.
☐ PICK-UP	WAIT	MAIL
· (Bu	siness Entity Nan	ne)
(D)	cument Number)	
(50	ournent Humber,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
	· ·······g ···························	
1		
		•
		Ì
· · · · · · · · · · · · · · · · · · ·		

Office Use Only



700135523887

09/16/08--01027--001 **125.00

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CHC RFP Delray Vero, LLC	•	
(Name of Limited Li	ability Company)	
The enclosed "Application by Foreign Limited Liability of Florida," Certificate of Existence, and check are submitted liability company to transact business in Florida	• •	
Please return all correspondence concerning this matter to	o the following:	
Donna Miller		
(Name of	Person)	
Realty Financial Partners		
(Firm/Cor	npany)	
40 William Street - Suite 12	20	
(Address)		
Wellesley, MA 02481		
(City/State and	l Zip Code)	
For further information concerning this matter, please cal	11:	
Donna Miller	781 , 371-2016	
	Area Code & Daytime Telephone Number)	
	EET ADDRESS:	
•	sion of Corporations on Building	
Tallahassee, FL 32314 2661	Executive Center Circle shassee, FL 32301	
Enclosed is a check for the following amount: [2] \$125.00 Filing Fee	155.00 Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy	

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. CHC RFP Delray Vero, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Massachusetts 3.
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. September 10, 2008 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to
exist or "perpetual") 6. N/A
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
₇ 40 William Street - Suite 120
Wellesley, MA 02481 (Street Address of Principal Office)
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
9. The name and usual business addresses of the managing members or managers are as follows: CHC-RFP VI JV Corp.
40 William Street - Suite 120
Wellesley, MA 02481
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:
real estate investment
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.)
Michael I Walton, Executive Vice President

Typed or printed name of signee

FILED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

GEGRETARY OF STATE TALLAHASSEE, FLORIDA

2008 SEP 16 PH 2: 28

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.

	Delray Vero, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:		
2. The name ar	nd the Florida street address of the registered agent and office are:	
	NRAI Services, Inc.	
	(Name)	
	2731 Executive Park Drive - Suite 4 Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Weston, FL City/State/Zip	
liability companagent and agree relating to the p	med as registered agent and to accept service of process for the above stated limited by at the place designated in this certificate, I hereby accept the appointment as registered to act in this capacity. I further agree to comply with the provisions of all statutes roper and complete performance of my duties, and I am familiar with and accept the by position as registered agent as provided for in Chapter 608, Florida Statutes.	

ASSISTANT SECRETARY

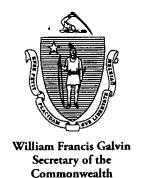
Certificate of Status (optional)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent **Certified Copy (optional)**

\$ 30.00

5.00

William L. De Napoli



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

September 11, 2008

TO WHOM IT MAY CONCERN:

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

CHC RFP DELRAY VERO, LLC

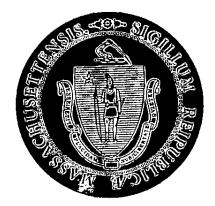
in accordance with the provisions of Massachusetts General Laws Chapter 156C on **September 10, 2008.**

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that, said Limited Liability Company is in good standing with this office.

l also certify that the names of all managers listed in the most recent filing are: CHC-RFP DELRAY VERO, LLC

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: CHC-RFP DELRAY VERO, LLC

The names of all persons authorized to act with respect to real property listed in the most recent filing are: CHC-RFP DELRAY VERO, LLC



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travino Galecin