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**EXAMINER** 

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT: RICKY SOTO** DATE: 10/04/2010 **REF. #:** 000478.133862.2 CORP. NAME: CABOT II-FL3B03, LLC ( ) ARTICLES OF DISSOLUTION ( ) ARTICLES OF INCORPORATION ( ) ARTICLES OF AMENDMENT ( ) TRADEMARK/SERVICE MARK ( ) FICTITIOUS NAME ( ) ANNUAL REPORT ( ) LIMITED LIABILITY (XX) FOREIGN QUALIFICATION ( ) LIMITED PARTNERSHIP ( ) WITHDRAWAL ( ) MERGER ( ) REINSTATEMENT ( ) CERTIFICATE OF CANCELLATION ( ) OTHER: STATE FEES PREPAID WITH CHECK# 53689 FOR \$ 125.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$\_\_\_\_ PLEASE RETURN: ( ) CERTIFIED COPY ( ) CERTIFICATE OF GOOD STANDING (XX) PLAIN STAMPED COPY ( ) CERTIFICATE OF STATUS

Examiner's Initials

#### 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. CABOT II-FL3B03, 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 wi	
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	y
2. Delaware 3. Applied For	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. <u>09-21-2010</u> 5. December 31, 2050	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
5. Upon qualification	Sion
(Date of Organization)  (Duration: Year limited liability company will cease to exist or "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)	9
7. One Beacon Street, Suite 1700	9
Boston, Massachusetts, 02108	45
(Street Address of Principal Office)	5
3. If limited liability company is a manager-managed company, check here	
). The name and usual business addresses of the managing members or managers are as follows:	
Cabot II Secured Pool I, LLC	
One Beacon Street, Suite 1700	
One Beacon Street, Suite 1700	
Boston, Massachusetts, 02108	
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record ne jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translator must be submitted.)	is in
1. Nature of business or purposes to be conducted or promoted in Florida: Real Estate Development	
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. I am aware that any false information submitted in a	
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	
Patrick V. Ryan	

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 Company is:	
CABOT II-FL3B03, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Steven B. Greenhut	
(Name)	
841 Prudential Drive, Suite 1400  Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Jacksonville FL 32207 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 partitived agentlas provided for in Chapter 608, Florida Statutes.  (Signature)  \$ 100.00 Filing Fee for Application	:d

\$ 25.00 Designation of Registered Agent

Certificate of Status (optional)

\$ 30.00 Certified Copy (optional)

\$ 5.00

## Delaware

PAGE

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "CABOT II-FL3B03, 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-SEVENTH DAY OF SEPTEMBER, A.D.

2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CABOT

II-FL3B03, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF SEPTEMBER,

A.D. 2010.

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

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AUTHENTY CATION: 8253042

DATE: 09-27-10

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