## Florida Department of State Division of Corporations

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To:

Division of Corporations

Pax Number

: (850)617-6383

Prom:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

; (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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## Foreign Limited Liability Company AIN11FL NEW PORT RICHEY LLC

Certificate of Status Certified Copy 0 Page Count 04 Estimated Charge \$125.00

#### COVER LETTER

JECT:						
	Name of Limited Liability Company					
enclosed tence, and	"Application by Foreign Limit d check are submitted to registe	ed Liability Company for Author the above referenced foreign	orization to Transact Br	siness in Flor	ida," Čeri	
	all correspondence concerning		·			
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	Jeff Ganguly			•		
		Name of Person	<u></u>		-	
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	Brennan, Dain, Le Ray, Wi	est, Torpy & Garner, P.C.			PS	
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MAII	ING ADDRESS:	STREET ADDRESS:	•	٠.		
Divisi	on of Corporations	Division of Corporation	15	•		
	ration Section	Registration Section				
P.O. Box 6327		Clifton Building				
Taliah:	assec, FL 32314	2661 Executive Center Tallahassee, FL 32301	Cirole	•	•	
	check for the following a	•	•			

TO:

Registration Section

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. AINI 1FL New Port Richey LLC (Name of Foreign Limited Liability Company; must includ	
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	
2, DE 3.	•
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 11/18/2011 5.	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	7 28
(Date first transacted business in Fiori (See sections 608.501 & 608.502 F.S. te	da, if prior to registration.) o determine penalty liability)
7. c/o ARC Corporate Properties, LLC, 1401 Broad Street, Clifto	n, New Jarsey 07013
	\$55 A
(Street Address of	Principal Office)
·	_
8. If limited liability company is a manager-managed company is a managed company is	ompany, check here 🛛 💝 👸
9. The name and usual business addresses of the manag	ring members or managers are as follows:
1. Robert J. Ambrosi, manager; 2. Joseph Cosenza, manager	
	N. T
c/o ARC Corporate Properties, LLC, 1401 Broad Street, Cliffo	on, New Jersey U7013
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	romoted in Florida:
Real property acquisition, operation and/or management.	
Signature of a member or an auth	orized representative of a member.
(In accordance with section 608.408(3), F.S., the execution	on of this document constitutes an affirmation under the 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.)
Robert J. Ambrosi	And the second of the second o

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	e of the Limited Liabi	lity Comp	pany is:	
AIN11FL Nev	w Port Richey LLC			
If unavailabl	ie, the alternate to be t	used in th	e state of Florida is:	
2. The name	and the Florida stree	t addr <del>e</del> ss	of the registered agent and office are:	2011 DEC 16 SECRETARY TALLAHASS
	C T Corporation Syste	em		哲心:
			(Nams)	- 188
	1200 South Pine Islan	d Road		EN E
	Florida	Street Add	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	8: 22 STATE FLORIDI
	Plantation		FT. 33324	
			City/State/Zip	
liability comp agent and agr relating to the	oany at the place design ree to act in this capac e proper and complete	nated in ti ity. I furti performa	to accept service of process for the above this certificate, I hereby accept the appoint ther agree to comply with the provisions once of my duties, and I am familiar with a sprovided for in Chapter 608, Florida atture)	tment as registered f all statutes ınd accept the
		\$ 100.00	Filing Fee for Application	
	:	\$ 25.00		
	i	\$ 30.00 \$ 5.00	Certified Copy (optional) Certificate of Status (optional)	
	•	A 5100	mar seeramen as managen (albandages)	

# Delaware

PAGE I

## The First State

I, JEFFREY N. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY "AIN11FL NEW PORT RICHEY 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 FIFTHENTH DAY OF DECEMBER, A.D. 2011.

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

2011 DEC 16 AM 8: 22

SECRETARY OF STATE

5068389 8300

111300485

You may warrify this cortificate calibe

AUTHENTICATION: 9233451

DATE: 12-75-11