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FEB 2 6 2015 U. BRUCE



February 25, 2015

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #: 9455600 SO Customer Reference 1: 15-02-0308 Customer Reference 2:

Dear Department of State, Florida :

Please obtain the following:

FOXROCK NEWGATE 5150 REALTY, LLC (MA) Registration Florida

FOXROCK NEWGATE 5150 REALTY, LLC (MA) Cert Copy of Application for Authority-Foreign Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact $\frac{n}{n}$ the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Cennie Proun® welterskiewenem 2115

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COVER LETTER

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Division of Corporations	
SUBJECT: FOXTOCK Newgate 5150 Realty, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Fl Existence, and check are submitted to register the above referenced foreign limited liability company to transac	
Please return all correspondence concerning this matter to the following:	
Jason Ward	
Name of Person	
Foxrock Properties	
Firm/Company	· _ ·
100 Newport Avenue Extension	
Address	
Quincy, MA 02171	
City/State and Zip Code	
jward@foxrockproperties.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	HASS
Christopher Reale at (617 Nanie of Contact Person Area Code Daytime Telephone Num	
Name of Contact Person · Area Code Daytime Telephone Num	EFLORE C
MALLING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	AHIO: 38
Enclosed is a check for the following amount: \$125,00 Filing Fee \$\$130,00 Filing Fee \$\$155,00 Filing Fee \$\$160,00 Filing Certificate of Status Certified Copy of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Foxrock Newgate 5150 Realty, LLC

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. .

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Liability Company," "LL.C," or "LLC.")			
_{2.} MA	3		
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)	
4		·	
(Date first transacted bus (See sections 605.0904 & 60	iness in Florida, if p 05.0905, F.S. to det	rior to registration.) rmine penalty liability)	
5. 100 Newport Avenue Extens	ion		
Quincy, MA 02171			
•	Address of Principa	Office)	
<u>100 Newport Avenue Extensi</u>	on		
Quincy, MA 02171			
	(Mailing Address)		
7. The name, title or capacity and address of the	ne person(s) wh	o has/have authority to manage is/a	re:
Jason Ward, Manager			
100 Newport Avenue	Exten		<u></u>
Quincy; MA 0217	•		220. 71 S
Wuney; MIF Odi I	-1		

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)

Signature of an authorized person

(In accordance with section 605.0203, 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.)

Christopher Reale

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

Foxrock Newgate 5150 Realty, 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:

NRAI Services, In	nc.	
1200 South Pine 1	Island Road	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		- SSE SSE CO
Plantation	33324 FL	OF ST CFL0
	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 605, Florida Statutes.

(Signature)

Gwendolyn Andrews, Special Assistant Secretary

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



William Francis Galvin Secretary of the Commonwealth

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

February 23, 2015

TO WHOM IT MAY CONCERN:

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

FOXROCK NEWGATE 5150 REALTY, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on January 20, 2015.

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.

I also certify that the names of all managers listed in the most recent filing are: NONE

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: JASON WARD

The names of all persons authorized to act with respect to real property listed in the most recent filing are: JASON WARD



In testimony of which, I have hereunto affixed the Great Seal of the Commonwealth on the date first above written.

William Tranino Italicin

Secretary of the Commonwealth

Processed By:HRM