

**MISPLACED TRUST**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000066485 3)))



H160000664853ABC3

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)205-8842  
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.

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
FS3 BUILDING 2 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

RECEIVED  
2016 MAR 15 PM 2:54  
FILED  
2016 MAR 15 P 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FS3 BUILDING 2 LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mona Elminyawi  
Name of Person

DLA Piper LLP (US)  
Firm/Company

33 Arch Street  
Address

Boston, MA 02110  
City/State and Zip Code

mona.elminyawi@dlapiper.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mona Elminyawi at (617) 406-5919  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: FS3 BUILDING 2 LLC

Enter new principal office address, if applicable: Two Seaport Lane

(Principal office address) Boston, MA 02110  
MUST BE A STREET ADDRESS

Enter new mailing address, if applicable: Two Seaport Lane

(Mailing address) Boston, MA 02110  
MAY BE A POST OFFICE BOX

2. The Florida document number of this limited liability company is: M15000005051

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: June 26, 2015

## SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: \_\_\_\_\_  
(must contain "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 contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_  
*Enter Florida Street Address*

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

*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 relative 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, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Authorized signatories have changed (name, title/capacity and address). See attached sheet.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Primo Fontana  
 Signature of the authorized representative

Primo Fontana  
 \_\_\_\_\_  
 Typed or printed name of signee

Filing Fee: \$25.00

**AUTHORIZED PERSON(S)**

**ADD**

Title	Name	Address
Authorized Signatory	Daniel J. Bradley	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	James J. Finnegan	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Pamela J. Herbst	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Carrie A. Bellerby	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Cristen Conkling	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Linda M. Danyluk	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Lily Kao	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Jonathan E. Martin	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Thomas Mullahey	Two Seaport Lane Boston, Massachusetts 02210
Authorized Signatory	Robert Plumb	Two Seaport Lane Boston, Massachusetts 02210

**REMOVE**

Title	Name	Address
President	Chris Scott	2855 Le Jeune Road, 4 <sup>th</sup> Floor, Coral Gables, FL 33134
Vice President	Vincent Signorello	2855 Le Jeune Road, 4 <sup>th</sup> Floor, Coral Gables, FL 33134
Vice President	Daniel Marcus	2855 Le Jeune Road, 4 <sup>th</sup> Floor, Coral Gables, FL 33134
Secretary	Kolleen Cobb	2855 Le Jeune Road, 4 <sup>th</sup> Floor, Coral Gables, FL 33134
Treasurer	Juan (Rusty) Godoy	2855 Le Jeune Road, 4 <sup>th</sup> Floor, Coral Gables, FL 33134
Assistant Secretary	Margarita M Martinez	2855 Le Jeune Road, 4 <sup>th</sup> Floor, Coral Gables, FL 33134

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