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2015 JUL -2 AM 10:38  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310

K. SALY  
EXAMINER

JUL -6 2015

# SUNSHINE CORPORATE & FILING SERVICES, INC.

3458 LAKESHORE DRIVE  
TALLAHASSEE, FLORIDA 32312  
(850) 656-4724  
TOLL FREE: 844-541-6792

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## COVER LETTER

WALK IN

ENTITY NAME: FOXROCK OT 5 Realty, LLC

CK # 1794

AMOUNT: 125<sup>00</sup>

PLEASE FILE THE ATTACHED AND RETURN:

☒ PLAIN COPY

☐ CERTIFIED COPY

PLEASE CONTACT TINA AT 850-508-1891 FOR  
FURTHER INFORMATION ON THIS MATTER.

THANK YOU!

TINA GOFF, PRESIDENT

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FoxRock OTS Realty, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip Code

create@foxrockproperties.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Reale

at ( 617 )

834-3005

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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

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

1. FoxRock OTS Realty, 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. The alternate name must include "Limited Liability Company," "L.L.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 business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 100 Newport Avenue Extension  
Quincy, MA 02171  
(Street Address of Principal Office)

6. 100 Newport Avenue Extension  
Quincy, MA 02171  
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
Jason Ward, Manager  
100 Newport Avenue Extension  
Quincy, MA 02171

8. 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)



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

FILED  
2015 JUL -2 AM 10:38  
STATE  
TALLAHASSEE, FL 32301

**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 OTS 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, Inc.

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

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.*

NRAI Services, Inc.

By: Eileen Chaddock

(Signature)

Eileen Chaddock, Special Asst. Secretary

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

FILED  
2015 JUL -2 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



William Francis Galvin  
Secretary of the  
Commonwealth

*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

Date: July 01, 2015

FILED  
2015 JUL -2 AM 10:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

To Whom It May Concern :

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

**FOXROCK OT5 REALTY, LLC**

in accordance with the provisions of Massachusetts General Laws, Chapter 156C, on  
**June 29, 2015.**

I further certify that said Limited Liability Company has not filed a Certificate of Cancellation;  
that said Limited Liability Company has not been administratively dissolved; and that, so far as  
appears of record, said Limited Liability Company has legal existence.



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

*William Francis Galvin*

Secretary of the Commonwealth

Certificate Number: 15074076370

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

Processed by: nmc