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To:	Division of Corporations Fax Number : (850)617-6383	ETARY OF	EP 23 AM	
From:	Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205-8842	SIAIL LONDA	8:57	

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Foreign Limited Liability Company Cumberland EAT Melbourne LLC

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Corporate Filing Menu

Help

·		, co	OVER LETTER	•	•	
	tration Section ion of Corporati	ons				
SUBJECT: _	CUMBERLAND	EAT MELBOURNE LLC				
Sebuser		Name of	f Limited Liability	Company		
The enclosed " Existence, and	Application by Po	oreign Limited Liability Com ed to register the above refe	npany for Authoriz renced foreign lim	ation to Tr	ransact Business in Florida," Certifity company to transact business in I	cate of Florida
Picase return a	II correspondence	concerning this matter to the	e following:			
	JUDITH S. K.	ELLY				
		b	Varue of Person			
	CUMBERLA	ND EAT MELBOURNE LI	C c/o NES FINA	NCIAL		
	·	F	imn/Company			
	1099 HINGH	AM STREET, SUITE 110				
	·_·		Address	•		
	ROCKLAND	, MA 02370				
	******	City/5	State and Zip Code	;		
	TMcLaughlan@	nesf.com				
		E-mail address: (to be use	d for future annua	l report no	tification)	
For further info	mation concernir	ng this matter, please call:				
Тегеѕ	a McLaughlan		781	871-68	300	
	Name	of Contact Person	Area Code	Day	rime Telephone Number	
Division Regist P.O. B	JNG ADDRESS on of Corporation ration Section fox 6327 assec, FL 32314			Division Registrat Clifton 6 2661 Exc	r ADDRESS: of Corporations cion Section duilding ceutive Center Circle see, FL 32301	
	neck for the follow 5.00 Filing Fee	ving amount: \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Fili Certified Copy	•	■ \$160,00 Filing Fee, Certificate of Status & Certified Copy	e

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

	THON 605.0902, FLORIDA STATUTES, THE FOLLO USINESS INTHE STATE OF FLORIDA:	DWING IS SUBMITTED TO REGISTER A F	OREIGN LIMITED LIABILITY
CUMBERLAND BAT			
**	eign Limited Liability Company; must include "Li	mited Liability Company," "L.L.C.," or "	LLC.")
(If name unavailable, enter a Liability Company," "L.L.C.	itemate name adopted for the purpose of transactin " or "LLC.")	g business in Florida. The alternate name	must include "Limited
2. DELAWARE		•	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	<u></u>
4	(Date first transacted business in Florida,	I provide registration	
	(See sections 605.0904 & 605.0905, F.S. to	determine penalty liability)	
5. 1099 HINGHAM STR	EET, SUITE HO		
ROCKLAND, MA 02			
6. 1099 HINGHAM STR	(Street Addross of Principal Offic BET, SUITE 110	e)	
ROCKLAND, MA 02	370		F. 2
	(Mailing Address)		
Name and street address	s of Florida registered agent: (P.O. Box NO	Cacceptable)	SE SE
Name:	C T Corporation System		S ~ P
Office Address:	1200 South Pine Island Road	···	$\frac{\omega}{2}$ ω $\frac{\omega}{2}$
	Plantation	, Florids 33324	
Registered agent's accept	(City)	(Zip code)	ကွေး <u>ကို</u> ကူး
Having been named as reg designated in this applicat to complywith the provision accept the obligations of n	gistered upent and to accept service of procession, I hereby accept the appointment as regions of all statutes relative to the proper and cap position as registered agent. CT Corporation System— (Registered agent's big	stored agent and agree to act in this ymplete performance of my duties, a	capacity. I further agree
•	city and address of the person(s) who has/hav C SOLE MEMBER	e authority to manage is/are:	
1099 HINGHAM STREE	r, Suite IIO		
ROČKLAND, MA 02370			
	of existence, no more than 90 days old, duly a f which it is organized. (If the certificate is in bmlitted)		
•	Signature of an authorize	d person	
his document is executed	in accordance with section 605.0203 (1) (b), F	Florida Statutes. I am aware that any fr	alse information

KRISTEN M. WEST, President of Sole Member, Cumberland EAT Inc.

Typed or printed name of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CUMBERLAND EAT MELBOURNE 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-THIRD DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5826885 8300

SR# 20150226867

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

Salited At Separce Sections in stole 3

Authentication: 10112397

Date: 09-23-15