M150000935Q

•
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2004)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800279274508

HOT INTENDED TO ACKNOWLEDGE SUFFICIENCY OF FILIN

BUSH OF BUSH OF STATE BUSH OF DOSTORIAL OF D

TILED MIS MOV 19 A 9.

NOV 20 2015 BRUCE CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE :

AUTHORIZATION

COST LIMIT

ORDER DATE: November 17, 2015

ORDER TIME : 10:19 AM

ORDER NO. : 876305-085

CUSTOMER NO: 4338256

FOREIGN FILINGS

NAME: BIG BOX PROPERTY OWNER C, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

то:		ion Section of Corporations	S						
SUBJE	BIG I	BOX PROPERT	TY OWNER C, LLC						
Name of Limited Liability Company									
			ign Limited Liability Com to register the above refer						
Please	return all co	rrespondence co	oncerning this matter to the	following:					
	_				<u>.</u>		_		
			N	ame of Person					
	Ĭ	EXETER							
Firm/Company									
	1	40 W. GERMA	ANTOWN PIKE, SUITE 1:	50					
				Address			_		
	I	PLYMOUTH M	EETING, PA 19462						
	City/State and Zip Code								
	Di	LIEBOWITZ@	KIRKLAND.COM						
			E-mail address: (to be use	d for future annual	report not	ification)	2015		
For fur	ther informa	tion concerning	this matter, please call:			AF AS	NON		
	EXETER			610 at (828-320		-0		
		Name of	Contact Person	Area Code	Day	time Telephone Number	_ >		
	Division o Registration P.O. Box				Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	ુ. 0 3)	
Enclos		for the following fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ıg Fee &	☐ \$160.00 Filing Fee, of Status & Certified C			

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BIG BOX PROPERTY				_
(Name of Fore	eign Limited Liability Company; must include "Lin	nited Liability Company," "L.L.C.," or	"LLC.")	
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transactin	g business in Florida. The alternate nan	ne must include "Lin	nited
, DELAWARE	3.			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable))	-
4			<u></u>	
	(Date first transacted business in Florida, (See sections 605.0904 & 605.0905, F.S. to	if prior to registration.) determine penalty liability)		
5. 140 W. GERMANTO	WN PIKE, SUITE 150			
PLYMOUTH MEETI	2015 NOV SECRETATALLAHA			
-	(Street Address of Principal Office	(x)		T
6. 140 W. GERMANTOV	WN PIKE, SUITE 150			
PLYMOUTH MEETI	IAC	(T		
	(Mailing Address)			
7. Name and street address	ss of Florida registered agent: (P.O. Box NO	T_acceptable)	도 도 오	
Name:	Corporation Service Company		9. 03	
	1201 Hays Street			
Office Address:		20001		
	Tallahassee	, Florida 32301 (Zip code)	-	
Registered agent's accep	(City)	(Zip code)		
Having been named as re	rgistered agent and to accept service of proce tion, I hereby accept the appointment as reg			
to complywith the provisi	ons of all statutes relative to the proper and	complete performance of my duties	s, and I am familio	ar with an
accept the obtigations of	my position as registered agent. Corporation Service Company By:	At-		
		ignature) Michele L. Abbott, Ass	t. VP	
8 The name title or can	acity and address of the person(s) who has/ha	ue authority to manage is/are:		
	ember, 140 W. Germantown Pike, Suite		9462	
Q Attached is a certificate	of existence, no more than 90 days old, duly	authanticated by the official basing	outtody of records	s in the
	of which it is organized. (If the certificate is i			
of the translator must be s		- ·		
×	13/1/	Name and Associated Association (Associated Association Associatio		
******	Signature of an authori	zed person		

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

DAVID P. LIEBOWITZ

Page 1

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "BIG BOX PROPERTY OWNER C, 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 EIGHTEENTH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIG BOX PROPERTY

OWNER C, LLC" WAS FORMED ON THE SIXTEENTH DAY OF NOVEMBER, A.D.

2015.

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

Authentication: 10442632

Date: 11-18-15

5880387 8300 SR# 20150965804

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