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PICK-UP	WAIT MAIL				
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BEPARTHEN OF STATE

FEB 2 3 2016
Y SULKER

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 027112 4709638

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: February 22, 2016

ORDER TIME : 1:51 PM

ORDER NO. : 027112-005

CUSTOMER NO: 4709638

FOREIGN FILINGS

NAME: NORTHLAND WINDWARD LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Michael Morel -- EXT# 62516

EXAMINER:

COVER LETTER

Registration Section

TO:

Div	ision of Corporatio	ns							
U BJEC T:	Northland Windwa	Northland Windward LLC							
J. 150 E.C. 1.	•	Name of Limited Liability Company							
he enclosed xistence, an	l "Application by Fo id check are submitte	reign Limited Liability Comp ed to register the above refer	pany for Authorizati enced foreign limite	on to Tra d liabilit	ansact Business in Florida," Certifica y company to transact business in Flo				
ease return	all correspondence	concerning this matter to the	following:						
	Beth H. Kinsle	у			•				
	_	Name of Person							
	c/o Northland	Investment Corporation							
		Firm/Company							
	2150 Washington Street								
	Address								
	Newton, MA 0	2462							
		City/S	tate and Zip Code	***************************************					
	bkinsley@north								
		E-mail address: (to be used	for future annual r	eport no	tification)				
or further in	formation concerning	g this matter, please call:							
Beth H. Kinsley		617 at (965-71	00					
	Name o	of Contact Person	Area Code	Day	ytime 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		of Corporations tion Section Building					
, un	unussee, 1 E 5 E 5 T 7				see, FL 32301				
	check for the follow 125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	; Fee &	☐ \$160.00 Filing Fee, Certificate 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

1. Northland Windward			7 / 1			
(Name of For	reign Limited Liability Company; must incl	ude "Limited Liability Col	mpany," "L.L.C.," or "L	ale.")		
Liability Company," "L.L.C	lternate name adopted for the purpose of tr," or "LLC.")	ansacting business in Flor	ida. The alternate name	must include '	"Limited	
2. Delaware	3	•				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI 1	number, if applicable)			
I	(Date first transacted business in	Florida, if prior to registrat	ion.)			
	(Sec sections 605,0904 & 605,0905,	, F.S. to determine penalty	liability)			
5. c/o Northland Investr	nent Corporation, 2150 Washington Str	ect, Newton, MA 02462	2			
	(Street Address of Princi	pal Office)				
5. c/o Northland Investm	ent Corporation, 2150 Washington Stre	eet, Newton, MA 02462				
	(Mailing Addre	ss)				
7. Name and street addre	ss of Florida registered agent: (P.O. B	ox NOT acceptable)				
Name:	Corporation Service Company			· .		
Office Address:	1201 Hays Street			e de la companya de l	<u> </u>	
	Tallahassee (City)	, Flori	da 32301 (Zip code)		822	manusia Arrana
Registered agent's accep			(istp code)	713 T.		i magazi
Taving been named as ro his application, I hereby	egistered agent and to accept service of accept the appointment as registered	f process for the above agent and agree to act	stated corporation at in this capacity. I ful	the place de other ägree t	esignated to co mply	l in y
vith the provisions of all	statutes relative to the proper and con					
he obligations of my pos	ition as registered agent. Corporation Service Company		ydia Cohen	<u> </u>	0	
	By: William		sst. Vice President			
	(Registered a	gent's signature)				
8. The name, title or cap	acity and address of the person(s) who	has/have authority to m	anage is/are:			
Lawrence R. Gottesdiene	r, CEO, President and Treasurer; Suzar	nne Abair, Secretary;		···		
Beth H. Kinsley, Vice Pr	esident. Addresses for all are c/o Nortl	nland Investment Corpo	ration,			
2150 Washington Street,	Newton, MA 02462					
		ate is in a foreign langu	age, a translation of th			
	Mich H. Signature of an	KCILLCCY authorized person	to the second se			
	on 605.0203, F.S., the execution of this true. I am aware that any false informa for in s.817.155, F.S.)					

Beth H. Kinsley, Authorized Signatory

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "NORTHLAND WINDWARD 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-SECOND DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NORTHLAND WINDWARD LLC" WAS FORMED ON THE NINTH DAY OF FEBRUARY, A.D. 2016.

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

Authentication: 201866509

Date: 02-22-16

5959147 8300 SR# 20161006109

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