

Division of Corporations

M16000006260<https://efile.flcourts.org/scripts/cfilcovr.exe>

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC
Account Number : 110432003053
Phone : (561)594-8107
Fax Number : (561)694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

2018 MAY 29 PM 1:33

DEPARTMENT OF
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CITY BUILDING AND ENGINEERING SERVICES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

B FIGUEROA

MAY 30 2018

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: City Building and Engineering Services, LLC

Enter new principal office address, if applicable: 200 Summit Drive

(Principal office address
MUST BE A STREET ADDRESS)

Suite 300

Burlington, MA 01803

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

200 Summit Drive

Suite 300

Burlington, MA 01803

2. The Florida document number of this limited liability company is: M16000006260

3. Jurisdiction of its organization: Massachusetts

4. Date authorized to do business in Florida: 08/05/2016

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

5. New name of the limited liability company: City BES, LLC

(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

City Florida 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.

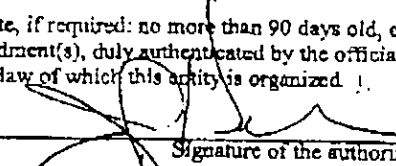
If Changing Registered Agent, Signature of New Registered Agent

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)(c), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	James E. Halloran	77 S. Bedford Street, Suite 350 Burlington, MA 01803	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	City Northeast Facilities Management LLC	8211 Cypress Plaza Dr. Jacksonville, FL 32256	<input checked="" 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

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.


Signature of the authorized representative

James E. Halloran, President

Typed or printed name of signee

Filing Fee: \$25.00

FILED

2018 MAY 29 AM 9:36

CLERK OF DISTRICT COURT



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02138

May 23, 2018

TO WHOM IT MAY CONCERN:

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

CITY BES, LLC

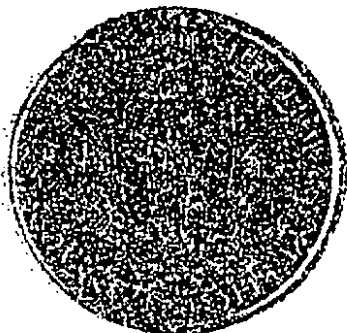
in accordance with the provisions of Massachusetts General Laws Chapter 156C on July 8, 2016.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **CITY NORTHEAST FACILITIES MANAGEMENT LLC**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **CITY NORTHEAST FACILITIES MANAGEMENT LLC**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **CITY NORTHEAST FACILITIES MANAGEMENT LLC**



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