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PICK-UP	☐ WAIT	MAIL	
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Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		
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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2016

RAYMONG ROBISON 3473 SE WILLOUGHBY BLVD STUART, FL 34994

SUBJECT: 547 AMHERST LLC Ref. Number: W16000057519

We have received your document for 547 AMHERST LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 416A00017536

#### COVER LETTER

TO:	Registration Section Division of Corporations	,				
SUBJi	547 Amherst LLC, a De	-	ompany			
O D D	EC1;		imited Liability C	Company		
	sclosed "Application by Foreign nce, and check are submitted to					
Please	return all correspondence conc	erning this matter to the	following:			
	Raymong G. Robiso	on				
	<del></del>	Na	me of Person			
	Fox, Wackeen, Dun	get et al.				
		Fi	m/Company			
	3473 SE Willoughb	y Blvd				
			Address		<del>.</del>	
	Stuart, FL 34994					
		City/St	ate and Zip Code			
	mkinch@foxwackeer	n.com				
	E-	mail address: (to be used	for future annual	report not	ification)	
For fu	ther information concerning thi	s matter, please call:				
	Michelle Kinch		772 at (	287-444	14 ext 220	
	Name of Co	ontact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registratic Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclos		amount: \$130.00 Filing Fee & ertificate of Status	□ \$155.00 Filin	g Fee &	■ \$160.00 Filing Fee, Certi	ficate

### 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 547 Amherst LLC, a Delaware limited liability company

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(Name of Foreign Limited	Liability Company; must i	nciude "Limited Liab	ility Company," "L.L.C.," or "	LLC.")		
(if name unavailable, enter alternate nam Liability Company," "LLC," or "LLC."		f transacting business	in Florida. The alternate name	must include "	Limited	
2, Deleware		, 7 <del>6-</del> 0797784				
(Jurisdiction under the law of which fo company is organized)	reign limited liability	J	(FEI number, if applicable)		_	
4,	ate first transacted business	in Blacks If away to	moletestion \			
· (Scc.	sections 605.0904 & 605.09	05, P.S. to determine	penalty liability)			
5. 50 Salem Street, Bldg. B, Suite 1	01					
Lynnfield, MA 01940						
· · · · · · · · · · · · · · · · · · ·	(Street Address of Pri	ncipal Office)		•		
6. 50 Salem Street, Bldg. B, Suite 10	01					
Lynnfield, MA 01940		, =,,		$\sum_{i \in \mathcal{I}} c_i$		
	(Mailing Ad	dress			9	
				<u>}</u>	AUG	
7. Name and street address of Florid				>= : (0:1)	2	172300
Name: Bou	pmond G.	KODISON	)	S	~	4
Office Address: 347	<u>مَا إِنْمَا £3 3</u>	ighly Blir	4.	m <sub>C</sub>	PH	
		J J	, Florida <u>34994</u>	LS.	÷.	
30.100	(City)		(Zip code)	<u>~</u> ≥≥	5	
Registered agent's acceptance:	, ,,			D(F)	_	
Having been named as registered a						
designated in this application, I her to complywith the provisions of all						
accept the obligations of my positio			penyernance of my anna,			.,,,,
	By S.M	<u></u>		•		
	(Register	cd agont's signature)				
B. The name, title or capacity and a	ddress of the person(s) v	tho has/have author	ity to manage ly/are			
James G. Baldini, Manager	was eas of the person(s)	1115 1145 114 1 0 4 4 1 5 1 1	b) to mange to de-			
50 Salem Street, Bldg. B, Suite 101	· · · · · · · · · · · · · · · · · · ·					
Lynnfield, MA 01940				<u> </u>		
		<del></del>		<del></del>		
9. Attached is a certificate of existen	ice, no more than 90 days	s old, duly authentic	cated by the official having	custody of rec	ords in	the
jurisdiction under the law of which i	t is organized. (If the cer	tificate is in a forci:	gn language, a translation of	the certificate	e under	oath
of the translator must be submitted)		~ (-	$\mathcal{L}$			
			Six .	ms		
mat it is a second of		I an nuthorized perso		iU 		
This document is executed in accord submitted in a document to the Department.	nance with section 005.02 intraent of State constitute	iug (1) (D), Florida is a third degree fel	Statutes. I am aware that any ony as provided for in s.817	, mise miorme ,155, F.S.	KION	
	Jumes &	Bullin	<u>.                                    </u>	<b>.</b>		
	Typed or pri	inted name of signce				

Page 1

# Defaware The First State

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

DELAWARE, DO HEREBY CERTIFY "547 AMHERST 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 TWELFTH DAY OF AUGUST, A.D. 2016.

Authentication: 202821513

Date: 08-12-16