

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 : CAPITOL SERVICES, INC.

Account Number : I20160000017

: (800)345-4647

Fax Number

: (800)432-3622

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

Email Address:

Foreign Limited Liability Company FHF I CROSSROADS WEST DAVIE, LLC

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DEC 09 2016

COVER LETTER

TO:	Registration Section Division of Corporations			•			
SUBJE	FHF I Crossroads West Davie, LLC						
20242		of Limited Liability C	ompany				
The en Existen	closed "Application by Poreign Limited Liability Co nes, and check are submitted to register the above ref	mpany for Authorizat erenced foreign limit	ion to Transa d liability oo	ct Susiness in Florida," Certificate o mpany to transact ousiness in Florida			
Please.	return all correspondence concerning this matter to the	be following:	•				
	Name of Person						
	Capitol Services - Corporate Filings Team						
	Flmn/Company						
	206 E. 9th St., Suite 1300	206 E. 9th St., Suite 1300					
	Address						
	Austin, TX 78701-4411						
	Cin	/State and Zip Code					
	B-mail address: (to be u	sed for future annual	report notific	ation)			
For fu	rther information concerning this matter, please call:		•				
		800 at (345-4647				
	Name of Contact Person	Area Code	Daytim	e-Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Hox 6327 Taliahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Registration Section Cliffon Building 2661 Executive Contex Circle Tallahassee, FL 32301		Corporations. Section Ling ive Contex Circle				
Enclos	ed is a check for the following amount: \$\sigma\$ \$\frac{1}{2}\$.00 Filing Fee \$\sigma\$ Certificate of Status	z \$1.55.00 Filin Certified Copy		1.\$160.00 Filing Foq, Cortificate f Sintus & Cortified Copy			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN PLORIDA IN COMPLIANCE WITH SECTION 606,0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: FHF I Crossroads West Davie, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC." (If name unavailable, enter, stiernate name adopted for the purpose of transacting business in Florida. The afternate mante must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (furisdiction under the law of which finelign limited liability company is organized) (FEI number, if applicable) Upon filing (Date first bransacted business in Florids, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) c/o TA Realty LLC, 28 State Street, 10th Ploor Bostop, MA 02109 (Street Address of Principal Office) c/o TA Realty LLC, 28 State Street, 10th Floor Boston, MA 02109 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hay Street Office Address: Tallahaseco Florida (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby apply the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all stauths 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. Lydia Cohen (Registered agent's signature) Asst. Vice President The name, title or capacity and address of the person(s) who has/have authority to manage is/are: FHF I, L.P. - Member c/o TA Realty LLC, 28 State Street, 10th Floor Boston, MA 02109

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of the authorized 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 follows as provided for in a.817,155, F.S.

Typed or printed name of algree Sr. Vice President

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FHF I CROSSROADS WEST DAVIE, 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 SIXTH DAY OF DECEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FHF I CROSSROADS WEST DAVIE, LLC" WAS FORMED ON THE SECOND DAY OF DECEMBER, A.D. 2016.

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

6236293 8300
SR# 20166931817
You may verify this certificate online at corp.delaware.gov/authver.shtml

MSS

Authentication: 203455688

Date: 12-06-16