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JAN 25 2017 S. YOUNG SFORETARY OF STATE
TALLAHASSFE, FLORID,



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 5, 2017

JOSEPH P.J. VRABEL BLAISCO, LLC 197M BOSTON POST ROAD WEST #241 MARLBOROUGH, MA 01752

SUBJECT: BLAISCO, LLC Ref. Number: W17000000705

We have received your document for BLAISCO, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Shelia H Young Regulatory Specialist II

Letter Number: 717A00000233

PM DESCRIPTION OF THE PROPERTY OF THE PROPERTY

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporation	s				
erib II	·C·T·	BlaisCo,	LLC			
SUBJI	.C.I;	Name of	Limited Liability (Company		
The en Exister	closed "Application by For ice, and check are submitte	eign Limited Liability Comp d to register the above refere	oany for Authoriza enced foreign limit	ition to Tra ted liability	nsact Business in Florida, or company to transact busing	Certificate of ness in Florida
Please	return all correspondence of	oncerning this matter to the	following:			
		Joseph P.	J. Vrabel			
		N	ame of Person			•
		BlaisCo,	LLC			
		Fi	rm/Company			•
197M Boston Post Road West #241						
Address					SECTION ALL	
Marlborough, MA 01752					AHASSE AHASSE	
		City/S	tate and Zip Code	:		- 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
			on@blaisco.com			PH C
	-	E-mail address: (to be use	d for future annua	l report not	ification)	PH 12: 53
For fu	ther information concernin	g this matter, please call:				~ ~
	Josep	h Vrabel	508 at ()	665-4844	_
	Name o	f Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrate Clifton B 2661 Exe	of Corporations of Section suilding centive Center Circle see, FL 32301	
Enclos	ed is a check for the follow ■ \$125.00 Filing Fee	ring amount: \$\infty\$ \$\infty\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fili Certified Copy	U	☐ \$160.00 Filing Fee, C of Status & Certified Co	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.09(12, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN A	LIMITED LIABILITY
COMPANYTOTRANSACTRUSINESS INTHE STATEOFFI ORIDA:	

	gn Limited Liability Company; must include "Limited	а сваниту сотра	my, 12120, 01 1210.	,	
If name unavailable, enter alto Liability Company," "L.L.C,"	ernate name adopted for the purpose of transacting bu or "LLC.")	siness in Florida.	The alternate name mus	st include "Lit	 nited
Massachuset	3,		516354		
(Jurisdiction under the law company is organized)	f which foreign limited liability	(FEI nun	nber, if applicable)		_
IN/A	IS C. C. L. L. L. L. L. D. L.	ias ta maistratico			
	(Date first transacted business in Florida, if pr (See sections 605.0904 & 605.0905, F.S. to dete	rmine penalty lia	hility)		
. 100 Bostor	Turnpike Road, Ste J9B #303				
Shrewsbur	y, MA 01545				-4.
	(Street Address of Principal Office)			17	7
5100 Bostor	Turnpike Road, Ste 19B #303			<u></u>	A
Shrewsburg	v, MA 01545			7	(2) (2)
	(Mailing Address)	<u> </u>		ယ်	<u>ૄ</u> ૣૢૣૣૣૺ
7 Name and street address	of Florida registered agent: (P.O. Box NOT ac	ccentable)		PH	-21 -21
Name:	Rochelle & John Blais			JAN -3 PH 12: 53	1.63
Office Address:	9839 Red Reef Court			ຜ	E T
	Fort Myers	, Florida	33919		
Registered agent's accept Having been named as res	(City) Ance: vistered agent and to accept service of process for		(Zip code)	ompany at ti	he pla
Having been named as reg designated in this applicat to complywith the provisio	nnce: vistered ugent and to accept service of process for ion, I hereby accept the appointment us registed that seems of all statutes relative to the proper and coming position as registered agent. A ockelle Black	or the above stored agent and applete performa	(Zip code) ated limited liability congree to act in this cap	pacity. I fur	ther a
Having been named as reg designated in this applicat to complywith the provisio	ance: sistered agent and to accept service of process fion, I hereby accept the appointment as registerns of all statutes relative to the proper and coming position as registered agent.	or the above stored agent and applete performa	(Zip code) ated limited liability congree to act in this cap	pacity. I fur	ther a
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The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

Date: December 19, 2016

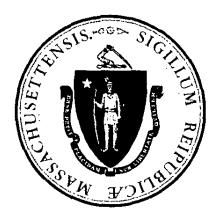
To Whom It May Concern:

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

BLAISCO, LLC

in accordance with the provisions of Massachusetts General Laws, Chapter 156C. on May 11, 2000.

I further certify that said Limited Liability Company has not filed a Certificate of Cancellation; that said Limited Liability Company has not been administratively dissolved; and that, so far as appears of record, said Limited Liability Company has legal existence.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

ranin Galein

Certificate Number: 16120371320

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: