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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2017

JOSEPH M. LANDOLFI, JR., LL.M. 7777 GLADES ROAD, SUITE 400 BOCA RATON, FL 33434 US

SUBJECT: SL BOUTWELL BUSINESS CENTER II LLC

Ref. Number: W17000063459

We have received your document for SL BOUTWELL BUSINESS CENTER II LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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) 254-6051.

Letter Number: 117A00015718

Judy A Leggett Regulatory Specialist II Registration Section

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations						
SL BOUTWELL BUSINE	SS CENTER II LLC					
SUBJECT:	Name of L	imited Liability C	Company			
The enclosed "Application by Foreign L Existence, and check are submitted to re	imited Liability Compagister the above referen	any for Authoriza aced foreign limit	tion to Transact Business in I ed liability company to trans	Florida," act busin	Certifi iess in I	cate of Florida.
Please return all correspondence concern	ning this matter to the t	ollowing:				
Joseph M. Landolfi. J	r., LL.M.					
	Na	me of Person				
Shapiro, Blasi, Wasse	rman & Hermann, P.A					
Firm/Company Acc						3 0
7777 Glades Road, St	nite 400			AHA:	2017 AUG -8	ĥ
Address						10
Boca Raton, FL 3343	4				至	HOEIVE
	City/St	ate and Zip Code		FI DRIDA	7: 8:	
jlandolfi@sbwh.law				74	@	
E-m	ail address: (to be used	for future annual	report notification)			
For further information concerning this	matter, please call:					
Joseph M. Landolfi, Jr., LL.M		561 at (477-7800			
Name of Con	tact Person	Area Code	Daytime Telephone N	umber		
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 Tallahassee, FL 32301			
	nount: 130.00 Filing Fee & tificate of Status	■ \$155.00 Filin Certified Copy				ite

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. SL Boutwell Business (Center II LLC Limited Liability Company; must include "Limit	ed Liability	Company," "L.L.C.," or "LLC.")	
				-
(If name unavailable, enter alternate o	ame adopted for the purpose of transacting business in Fi			lity Company." "L.L.C," or "LLC.")
DELAWARE		3.	82-2211408	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI numbe	r. if applicable)
4				
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ			
5. 788 Morris Tumpike		6.	788 Morris Turnpike	
Short Hills, NJ 07078	Principal Office)		Short Hills, NJ 07078	:2)
Short Hills, 143 07076				
				A S
7 Name and street addres	ss of Florida registered agent: (P.O. Bo.	x NOT a	cceptable)	ECR
7. Italie and silver adore.			,	
Name:	Shapiro, Blasi, Wasserman & Herman	ш, г.д.		IR)
Office Address:	7777 Glades Road, Suite 400		- <u></u>	. ∰ <u>∞ ¦</u>
	Boça Raton		, Florida 33434	EFFCOF SI
	(Cky)	-	(Zip code	
Registered agent's accep	itance: gistered agent and to accept service of	·	Con the above stated limited	liability communy at the place
to comply with the provis and accept the obligation	ions of all statutes relative to the prope s of my position as registered agent		inplete performance by my a	
	(Registered agent)	ingnature)		
8. The name, title or cap	acity and address of the person(s) who h	as/have	authority to manage is/are:	
Title or Capacity:	Name and Address:	<u>T</u>	tle or Capacity:	Name and Address:
MGR	Kenneth Silverman			
	788 Morris Tumpike Short Hills, NJ 07078			
	Short Hills, 19 07076	_		
		- -		
		_		
(Use attachments if neces				
 Attached is a certificate jurisdiction under the law of the translator must be s 	e of existence, no more than 90 days old of which it is organized. (If the certificate submitted)	l, duly au ate is in a	thenticated by the official ha foreign language, a translati	ving custody of records in the on of the certificate under oath
10. This document is executed submitted in a document to	o the Department of State constitutes a t	03 (1) (b) hird degr	, Florida Statutes. I am aware ee felony as provided for in s	e that any false information s.817.155, F.S.
	Signaru	re of an auth	prized person	
	Kenneth Silverman, Manager			
		ur printed o	me of sience	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "SL BOUTWELL BUSINESS CENTER II 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 THIRD DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SL BOUTWELL BUSINESS CENTER II LLC" WAS FORMED ON THE NINETEENTH DAY OF JULY, A.D. 2017.

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

TAMES OF THE PARTY OF THE PARTY

Authentication: 202998435

Date: 08-03-17