

MI7000006987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

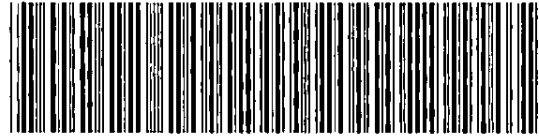
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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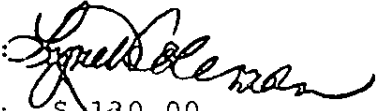
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FILED  
2017 AUG 15 AM 8:32  
CLERK, DEPT. OF STATE  
TALLAHASSEE, FLORIDA

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2017 AUG 15 PM 1:43  
CLERK, DEPT. OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
AUG 16 2017

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 770787 4709638  
AUTHORIZATION :   
COST LIMIT : \$ 130.00

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ORDER DATE : August 15, 2017  
ORDER TIME : 12:42 PM  
ORDER NO. : 770787-005  
CUSTOMER NO: 4709638  
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FOREIGN FILINGS

NAME: NORTHLAND RIALTO LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
\_\_\_\_\_ PLAIN STAMPED COPY  
XXX \_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_



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

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC")

2. Delaware 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration. See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. c/o Northland Investment Corporation  
(Street Address of Principal Office)  
2150 Washington Street  
Newton, MA 02462

6. c/o Northland Investment Corporation  
(Mailing Address)  
2150 Washington Street  
Newton, MA 02462

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 DEPARTMENT OF STATE  
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7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company  
 Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

**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 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.*

By: Corporation Service Company M. Zender Melissa Zender  
(Registered agent's signature) (Signature) (Name and Title)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President and CEO</u>	<u>Lawrence R. Gottesdiener</u> <u>c/o Northland Investment Corporation</u> <u>2150 Washington Street</u> <u>Newton, MA 02462</u>	<u>Vice President</u>	<u>Matthew R. Gottesdiener</u> <u>c/o Northland Investment Corporation</u> <u>2150 Washington Street</u> <u>Newton, MA 02462</u>
<u>Secretary and Treasurer</u>	<u>Suzanne Abair</u> <u>c/o Northland Investment Corporation</u> <u>2150 Washington Street</u> <u>Newton, MA 02462</u>	<u>Assistant Secretary</u>	<u>Beth H. Kinsley</u> <u>c/o Northland Investment Corporation</u> <u>2150 Washington Street</u> <u>Newton, MA 02462</u>

(Use attachments if necessary)

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)

10. 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 felony as provided for in s.817.155, F.S.

Beth H. Kinsley  
Signature of an authorized person

Beth H. Kinsley  
Typed or printed name of signer

# Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NORTHLAND RIALTO 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 FIFTEENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NORTHLAND RIALTO LLC" WAS FORMED ON THE THIRTEENTH DAY OF JUNE, A.D. 2017.

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

FILED  
2017 AUG 15 AM 8:32  
SECRETARY OF STATE  
TALLAHASSEE, FL 09106



  
Jeffrey W. Bullock, Secretary of State

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SR# 20175727935

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203060263

Date: 08-15-17