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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

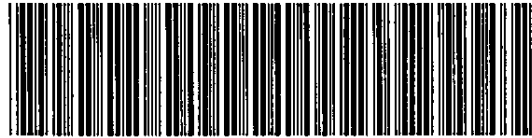
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TALLAHASSEE, FLORIDA

O SIMMONS
FEB 22 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 14, 2018

BENJAMIN MCPHERSON
201 FRONT ST, STE 107
KEY WEST, FL 33040

SUBJECT: BOSTON BURIAL GROUNDS TOURS, LLC
Ref. Number: W18000014818

We have received your document for BOSTON BURIAL GROUNDS TOURS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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

Octavia L Simmons
Regulatory Specialist II

Letter Number: 618A00003150

RECEIVED
FEB 22 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BOSTON BURIAL GROUNDS TOURS, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BENJAMIN MCPHERSON

Name of Person

HISTORIC TOURS OF AMERICA, INC.

Firm/Company

201 FRONT STREET SUITE 107

Address

KEY WEST, FL 33040

City/State and Zip Code

SMONSALVATGE@HISTORICTOURS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BENJAMIN MCPHERSON

305

292-8912

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**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. BOSTON BURIAL GROUNDS TOURS, 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. MASSACHUSETTS

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-4174211

(FEI number, if applicable)

4. N/A

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

5. 380 DORCHESTER

(Street Address of Principal Office)

SOUTH BOSTON MA 02127

6. 201 FRONT STREET

(Mailing Address)

SUITE 107

KEY WEST, FL 33040

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

Name: BENJAMIN MCPHERSON

Office Address: 201 FRONT STREET SUITE 107

KEY WEST

(City)

, Florida 33040

(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.

BENJAMIN MCPHERSON

(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

PRESIDENT

EDWIN O SWIFT III

SECRETARY

CHRISTOPHER BELLAND

201 FRONT ST STE 107

KEY WEST FL 33040

201 FRONT ST STE 107

KEY WEST FL 33040

VICE PRESIDENT

EDWIN O SWIFT IV

TREASURER

BENJAMIN MCPHERSON

201 FRONT ST STE 107

KEY WEST FL 33040

201 FRONT ST STE 107

KEY WEST FL 33040

(Use attachments if necessary)

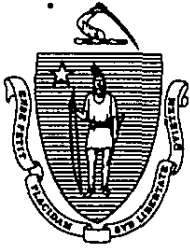
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must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

Signature of an authorized person

BENJAMIN MCPHERSON

Typed or printed name of signee



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

February 2, 2018

TO WHOM IT MAY CONCERN:

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

BOSTON BURIAL GROUNDS TOURS, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **January 26, 2018.**

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are:
CHRISTOPHER CLARK BELLAND, EDWIN OLDS SWIFT III, EDWIN OLDS SWIFT IV, BENJAMIN NATHANIEL MCPHERSON, CHRISTIAN BELLAND

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **CHRISTOPHER CLARK BELLAND, EDWIN OLDS SWIFT III, EDWIN OLDS SWIFT IV, BENJAMIN NATHANIEL MCPHERSON, CHRISTIAN BELLAND, BENJAMIN MCPHERSON, JOHN WELBY**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **BENJAMIN MCPHERSON, JOHN WELBY**



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galvin

Secretary of the Commonwealth