

# M18000000B045

Florida Department of State  
Division of Corporations  
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TALLAHASSEE, FLORIDA

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Email Address: henderson@longpointpg.com

Foreign Limited Liability Company  
LONGPOINT PROPERTY GROUP LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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2018 AUG 31 AM 9:50

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

IN COMPLIANCE WITH SECTION 605.02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. LONGPOINT PROPERTY GROUP LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LLC.")

(If none available, 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 J. 82-4993529 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. UPON QUALIFICATION (Date first transacted business in Florida, if prior to registration. (See sections 605.090-1 & 605.095, F.S. to determine penalty liability))

5. 116 HUNTINGTON AVENUE SUITE 601 BOSTON, MASSACHUSETTS 02116 (Street Address of Principal Office)

6. 116 HUNTINGTON AVENUE SUITE 601 BOSTON, MASSACHUSETTS 02116 (Mailing Address)

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

Name: MARIA HENDERSON Office Address: 13218 WEST BROWARD BOULEVARD PLANTATION, Florida 33325 (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.

Maria Henderson (Registered agent's signature) MARIA HENDERSON

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

Table with 4 columns: Title or Capacity, Name and Address, Title or Capacity, Name and Address. Row 1: Manager, Dwight Angelini, 116 Huntington Avenue Suite 601, Boston, MA 02116.

(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 authorized person)

Dwight Angelini

(Typed or printed name of signer)

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# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LONGPOINT PROPERTY GROUP 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 TWENTY-NINTH DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LONGPOINT PROPERTY GROUP LLC" WAS FORMED ON THE NINTH DAY OF MARCH, A.D. 2018.

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



  
Jeffrey W. Bullock, Secretary of State

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SR# 20186413663

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

Authentication: 203333000

Date: 08-29-18