

MI90000002489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

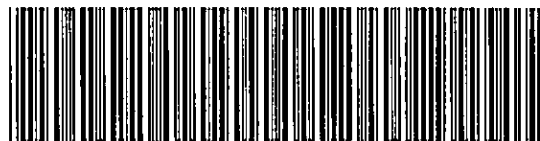
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

3/11

Need Principal add WI9-18169

Office Use Only



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02/14/19--01008--014 **160.00

FILED
2019 MAR 11 PM 3:21
TALLAHASSEE, FL

S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 23, 2019

SEAN STOCKBRIDGE
P.O. BOX 263
WEYMOUTH, MA 02190

SUBJECT: OPTION C PROPERTIES, LLC
Ref. Number: W19000018169

We have received your document for OPTION C PROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

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) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 219A00003870

RECEIVED

MAR 11 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Option C Properties 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:

Sean Stockbridge

Name of Person

Option C Properties LLC

Firm/Company

PO BOX 263

Address

Weymouth, MA 02190

City/State and Zip Code

optioncproperties@gmail.com

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

For further information concerning this matter, please call:

Chris Bruce

781

953-6501

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. Option C Properties 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. MA
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(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. ~~PO Box 243~~
(Street Address of Principal Office)
~~Weymouth MA 02190~~
16 Shady Acre Lane
Pembroke MA 02359
6. PO Box 243
(Mailing Address)
Weymouth MA 02190

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Stephanie Dachus-Hernandez
- Office Address: 1820 Magliano Drive
Boynton Beach, Florida 33436
(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.


(Registered agent's signature)

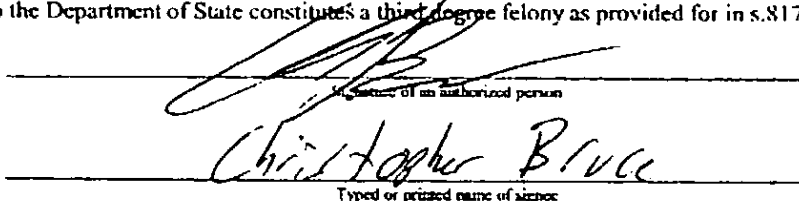
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
owner	Chris Bruce 16 Shady acre Pembroke, MA 02359	owner	Sean Stockbridge 59 Oldfield Hanover, MA 02339
Owner	Kenny Sanchez 257 Old Washington Pembroke, MA 02359	Owner	

(Use attachments if necessary)

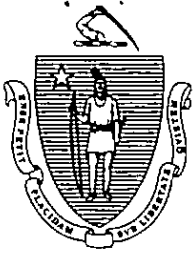
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must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



Typed or printed name of signor
Christopher Bruce

FILED
2019 MAR 11 PM 3:21
HANSBEE, FL



William Francis Galvin
Secretary of the
Commonwealth

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

February 5, 2019

TO WHOM IT MAY CONCERN:

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

OPTION C PROPERTIES, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **June 27, 2014.**

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 BRUCE, KENNY SANCHEZ, SEAN STOCKBRIDGE

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 BRUCE, KENNY SANCHEZ, SEAN STOCKBRIDGE**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **CHRISTOPHER BRUCE, KENNY SANCHEZ, SEAN STOCKBRIDGE**

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