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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 693<u>6</u>79 AUTHORIZATION COST LIMIT ORDER DATE: March 21, 2019 ORDER TIME : 2:26 PM ORDER NO. : 693679-005 CUSTOMER NO: 8044365 FOREIGN FILINGS NAME: CLUB BENCHMARKING, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_\_ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Lydia Cohen -- EXT# 62974

## **COVER LETTER**

TO:		ion Section of Corporations							
	Club	Benchmarking,	LLC						
SUBJEC	CT:	Name of Limited Liability Company							
								t Business in Florida, npany to transact busi	
Please re	etum all co	rrespondence co	ncerning t	his matter to the f	ollowing:				
		lim Butler							
	-			Na	me of Persor	1	···		-
	Club Benchmarking, LLC								
	Firm/Company 551 Boylston Street Suite 301								-
	-	<u> </u>	<u>-</u>	<del> </del>	Address				-
	Boston, MA 02116								
	jg jg	abauer@halstat.c	com	City/Sta	ate and Zip C	ode			<del>-</del>
	_		E-mail add	dress: (to be used	for future an	inual	report notifica	tion)	-
For furth	er informa	ition concerning	this matter	r, please call:					
Jason Gabauer			239		302-6691				
		Name of	Contact Po	erson	at ( Area C	ode	) 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						
		is a check for the ke check payable		gamount: RIDA DEPART	MENT OF S	TAT	r <b>e</b>		
	<b>□</b> \$125.	00 Filing Fee		0.00 Filing Fee & Certificate of State			Filing Fee & d Copy	\$160.00 Filing of Status & Cer	

## 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: Club Benchmarking, 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 "L.L.C.") DE (Jurisdiction under the law of which foreign limited liability company is organized) upon filing (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability.) 551 Boylston Street Suite 301 551 Boylston Street Suite 301 6. (Mailing Address) (Street Address of Principal Office) Boston, MA 02116 Boston, MA 02116 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee 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. Lydia Cohen Corporation Service Company Asst. Vice President

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Jason Gabauer Manager Name: ☐ Manager Name: \_\_\_\_\_ 2640 Golden Gate Parkway #10 Address: \_\_\_\_ Member Address: \_ ☐ Member Naples, FL 34105 Authorized Authorized Person Person Other\_\_\_\_ Other\_\_ Other\_\_\_ Other\_\_\_\_ Manager Manager Manager Name: Address: Member ■ Member Address: Authorized ☐ Authorized Person Person Other\_\_\_\_ Other\_\_\_ Other\_\_\_\_ Manager Name: \_\_\_\_\_ Manager Manager Name: \_ ☐ Member Address: \_\_\_\_\_\_ Address: \_\_\_\_ Authorized Authorized Person Person Other\_\_\_\_\_ Other Other\_\_\_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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.

Page 1



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

DELAWARE, DO HEREBY CERTIFY "CLUB BENCHMARKING, 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-FIRST DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLUB BENCHMARKING, LLC" WAS FORMED ON THE EIGHTH DAY OF FEBRUARY, A.D. 2018.

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



Authentication: 202492377

Date: 03-21-19