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PERCENTION IN 11: 20

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

REFERENCE : 811168 7381795

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: June 17, 2019

ORDER TIME : 9:32 AM

ORDER NO. : 811168-005

CUSTOMER NO: 7381795

FOREIGN FILINGS

NAME: GATEWAY GP LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: ____

COVER LETTER

TO: Registration Section

Divisi	ion of Corporations			
SUBJECT: _		Gateway GP LLC		
_	Na	me of Limited Liability	Company	
The enclosed " Existence, and	Application by Foreign Limited Liability check are submitted to register the above	Company for Authorize e referenced foreign limi	ntion to Transact Business in Flo ted liability company to transact	orida," Certificate of t business in Florida.
Please return a	ll correspondence concerning this matter	to the following:		
	Beth Kinsley			
		Name of Person		
	Northland Investment Corporation			
		Firm/Company		77 Si
	2150 Washington Street			2019 JUN 19 TAECAHASS
		Address		188
	Newton, MA 02462			P P
		City/State and Zip Code		4: 37 STATE
	bkinsley@northland.com			37 REF
	E-mail address: (to l	be used for future annual	report notification)	
For further info	ormation concerning this matter, please co	all:		
Beth	Kinsley	617 at (965-7100	
	Name of Contact Person	Area Code	Daytime Telephone Num	ber
Divisi Regist P.O. E	LING ADDRESS: ion of Corporations tration Section Box 6327 hassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Please	sed is a check for the following amount: make check payable to: FLORIDA DE 125.00 Filing Fee \$130.00 Filing Certificate	Fee & S 155.00	Filing Fee & S 160.00 F	iling Fee, Certificate & 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: Gateway GP 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," "LLC," or "LLC," (Jurisdiction under the law of which foreign limited liability company is organized) nsacted business in Florids, if prior to registration.) 605.0904 & 605.0905, F.S. to determine penalty liability) 2150 Washington Street 2150 Washington Street (Street Address of Principal Office) Newton, MA 02462 Newton, MA 02462 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee , Florida (City) 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. Roxanne Turner Asst. Vice President

itle or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: Northland Fund VII, L.P.	Manager	Name: Suzanne Abair
Member	Address: 2150 Washington Street	☐ Member	Address: 2150 Washington Street
Authorized	Newton, MA 02462	Authorized	Newton, MA 02462
Person		Person	
Other	Other	Other	Other
Мападет	Name: Matthew Gottesdiener	Manager	Name: Beth Kinsley
Member	Address: 2150 Washington Street	☐ Member	Address: 2150 Washington Street
Authorized	Newton, MA 02462	Authorized	Newton, MA 02462
Person		Person	
Other	Other	Other	Other 9
Manager Member	Name: Larry Gottesdiener Address: 2150 Washington Street	☐ Manager	Name: PH
Authorized	Newton, MA 02462	_	Address:
Person		Authorized	37 IIIA
Other	Other	Person Other	Other
Attached is a certi crisdiction under the f the translator muse. O. This document is	se an attachment to report more than six (6), may be added to the index when filing your F ificate of existence, no more than 90 days old e law of which it is organized. (If the certificate to be submitted) se executed in accordance with section 605.020 ment to the Department of State constitutes a terminal of the section of the section of the section of the department of the State constitutes at the section of the sectio	Florida Department of State , duly authenticated by the ate is in a foreign language, 03 (1) (b), Florida Statutes.	Annual Report form. official having custody of records in t a translation of the certificate under of the certificate un

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GATEWAY GP 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 THIRTEENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GATEWAY GP LLC"

WAS FORMED ON THE TWENTY-FIFTH DAY OF OCTOBER, A.D. 2018.

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

2019 JUN 19 PM 4: 37

Authentication: 203018890

Date: 06-13-19

7119501 8300 SR# 20195418951