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**Foreign Limited Liability Company  
 Pyramid 2161 Maritime Management I.L.C.**

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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. PYRAMID 2161 MARITIME MANAGEMENT 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 laws of which foreign limited liability company is organized)

3. (FBI number, if applicable)

4. (Date that transacted business in Florida, if prior to registration; See sections 605.0904 & 605.0905, F.S. to determine priority liability)

5. 30 ROWES WHARF SUITE 5300  
(Street Address of Principal Office)  
BOSTON MA 02110

6. 30 ROWES WHARF SUITE 5300  
(Mailing Address)  
BOSTON MA 02110

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

Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation Florida 33324  
(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.

By: Sherry McGinnes  
(Registered agent's signature)

Sherry McGinnes, Assistant Secretary

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:

Manager Name: WARREN Q FIELDS

Member Address: 30 ROWES WHARF

Authorized SUITE 5300

Person BOSTON MA 02110

Other \_\_\_\_\_  Other \_\_\_\_\_

Title or Capacity: Name and Address:

Manager Name: RICHARD M KELLEHER

Member Address: 30 ROWES WHARF

Authorized Suite 5300

Person BOSTON MA 02110

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: CHRISTOPHER DEVINE

Member Address: 30 Rowes Wharf

Authorized Suite 5300

Person Boston, MA 02110

Other VP \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

Authorized \_\_\_\_\_

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

Authorized \_\_\_\_\_

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

Authorized \_\_\_\_\_

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

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Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

Cynthia Warren  
 Signature of authorized person

Cynthia Warren  
 Typed or printed name of signer



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02188*

William Francis Galvin  
Secretary of the  
Commonwealth

August 13, 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

**PYRAMID 2161 MARITIME MANAGEMENT LLC**

in accordance with the provisions of Massachusetts General Laws Chapter 156C on August 14, 2019.

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; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; 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 **RICHARD M. KELLEHER, WARREN Q. FIELDS**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **RICHARD M. KELLEHER, WARREN Q. FIELDS, CHRISTOPHER DEVINE**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **RICHARD M. KELLEHER, WARREN Q. FIELDS, CHRISTOPHER DEVINE**

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth



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