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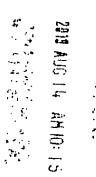
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## CUNNINGHAM, MACHANIC, CETLIN, JOHNSON, HARNEY & TENNEY, LLP

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2 Also Admitted in New Hampshire

August 13, 2019

Florida Division of Corporations Attn: Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Federal Express 7759 6899 6499

Re: 48 Central Street, LLC

Dear Sir or Madam:

I have enclosed the following documents regarding the above-referenced limited liability company for filing:

- 1. Cover Letter:
- 2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
- 3. Certificate of Good Standing (Commonwealth of Massachusetts); and
- 4. Check 87707 in the amount of \$130 for the filing fee and Certificate of Status.

I have also enclosed return envelope for the Certificate of Status. Please let me know if you have any questions. Thank you.

Sincerely,

CUNNINGHAM, MACHANIC, CETLIN, JOHNSON, HARNEY & TENNEY, LLP

Richard B. Schafer

RBS:smb Enclosures

#411526

#### **COVER LETTER**

TO:

ľO:	Registration Section Division of Corporations						
SUBJE	48 Central Street, LLC						
		Name of Lim	ited Liability (	Company			
				ntion to Transact Business in Florida," C ted liability company to transact busines			
Please	return all correspondence conce	erning this matter to the foll	owing:				
	Richard B. Schafer.	. Esq.					
		Name	of Person				
	Cunningham, Mach	Cunningham. Machanic, et al., LLP					
		Firm/	Company				
	220 North Main Str	eet, Suite 301					
	<u> </u>	A	ddress				
	Natick, MA 01760	Natick, MA 01760					
	<u> </u>	City/State	and Zip Code				
	rschafer@cmlaw.net						
	E-i	mail address: (to be used for	r future annual	report notification)			
For fur	ther information concerning thi	s matter, please call:					
	Richard B. Schafer	ឧ	508	651-7524			
	Name of Co	ontact 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 for Please make check payable to		ENT OF STA	ГЕ			
	□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		Filing Fee & S160.00 Filing Fe ed Copy of Status & Certif			

### 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:

(Name of Foreign	Limited Liability Company,	must include "Limit	d Liabilit	Company," "L.L.C.," or "L.L.C.")	
(If name unavailable, enter alternate	name adopted for the purpose of tra	msacting business in Flo	orida. The al	ternate name must include "Limited Liabi	lity Company," "L.L.C." or "LLC.")
Massachusetts			3.	81-5245871	
(hirisdiction under the law of which foreign limited liability company is		any is organized)	5.	(FEI numbe	r, if applicable)
4					
	(Date first transacted busine (See sections 605.0904 & 6	ess in Florida, if prior to 05,0905, F.S. to determ	registration ine penalty	.) bability)	2 P
33 Central Street 5.			6.	33 Central Street	<b>A</b> UG
(Street Address of Principal Office)		<del></del>	0.	(Mailing Addre	(a)
Manchester, MA 0194	14			Manchester, MA 01944	72×
					0.
7. Name and street addre	ss of Florida registered a	igent: (P.O. Box	NOT a	cceptable)	
Name:	Christopher Leavitt				
Office Address:	-202 Sea Spray Avenue	- 150 B	nad	ley Place 4	F615
	Palm Beach			, Florida 33480	
		(City)		(Zip code)	<del></del>

#### 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. 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: Name: Katherine M. Leavitt Christopher Leavitt Manager Manager Address: 33 Central Street 202 Sea Spray Avenue Address: ■Member ☐ Member Manchester, MA 01944 Palm Beach, FL 33480 ☐ Authorized Authorized Person Person Other\_ Other Other Other \_\_\_ Jonathan B. Leavitt Manager 33 Central Street Address: ■Member ☐ Member Manchester, MA 01944 Authorized Authorized Person Person Other\_ Other Other\_\_ Other\_ Name: \_\_\_\_\_ Name: Manager Manager Member ☐ 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. Signature of an authorized person

Typed or printed name of signoc

Christopher Leavitt, Manager



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

#### August 8, 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

#### 48 CENTRAL STREET, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on November 17, 2016.

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: CHRISTOPHER LEAVITT, JONATHAN B. LEAVITT, KATHERINE M. LEAVITT

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 LEAVITT, JONATHAN B. LEAVITT, KATHERINE M. LEAVITT, MEGAN H. SULLIVAN

The names of all persons authorized to act with respect to real property listed in the most recent filing are: CHRISTOPHER LEAVITT, JONATHAN B. LEAVITT, KATHERINE M. LEAVITT



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travino Galicin