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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: Registration Section
Division of Corporations

SUBJECT: 48 Central Street, 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:

Richard B. Schafer, Esq.
_____ Name of Person

Cunningham, Machanic, et al., LLP
_____ Firm/Company

220 North Main Street, Suite 301
_____ Address

Natick, MA 01760
_____ City/State and Zip Code

rschafer@cmlaw.net
_____ E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard B. Schafer	508	651-7524
_____ 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:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$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. 48 Central Street, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.C.")

(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. Massachusetts
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-5245871
(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. 33 Central Street
(Street Address of Principal Office)

6. 33 Central Street
(Mailing Address)

Manchester, MA 01944
Manchester, MA 01944

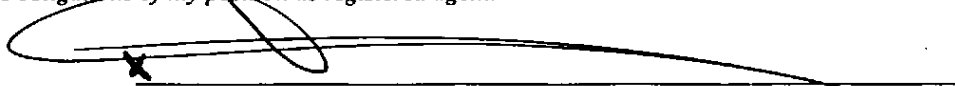
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7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Christopher Leavitt

Office Address: ~~202 Sea Spray Avenue~~ 150 Bradley Place #615
Palm Beach, Florida 33480
(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. 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: Christopher Leavitt
 Member Address: ~~202 Sea Spray Avenue~~ 150
 Authorized Bradley
 Person Palm Beach, FL 33480
 Other #615
 Other 33480

Title or Capacity: Name and Address:

Manager Name: Katherine M. Leavitt
 Member Address: 33 Central Street
 Authorized Manchester, MA 01944
 Person _____
 Other _____
 Other _____

Manager Name: Jonathan B. Leavitt
 Member Address: 33 Central Street
 Authorized Manchester, MA 01944
 Person _____
 Other _____
 Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____
 Other _____

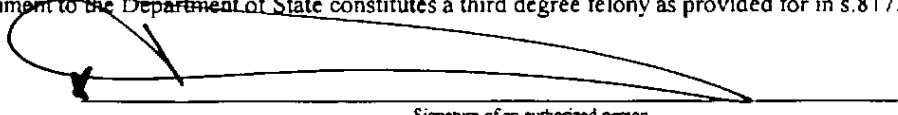
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____
 Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____
 Other _____

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.



Signature of an authorized person

Christopher Leavitt, Manager

Typed or printed name of signee



William Francis Galvin
Secretary of the
Commonwealth

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

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.

William Francis Galvin

Secretary of the Commonwealth

