# 11190010399

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	TIAW [	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer;	

Office Use Only



500335510405

2019 OCT 28 PM 4: 45

Y SCOTT OCT 2 9 2019

### FLORIDA FILING & SEARCH SERVICES, INC.

<sup>5</sup> P.O. BOX 10662 TALLAHASSEE, FE 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/28/19

NAME:

ALBANY ROAD-MERIDIAN CONCOURSE LLC

TYPE OF FILING: APPLICATION

COST: 155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbie Hodge

#### **COVER LETTER**

TO:

	Division of Corporations
UBJE	Albany Road-Meridian Concourse LLC T:
	Name of Limited Liability Company
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cer , and check are submitted to register the above referenced foreign limited liability company to transact business
ease re	turn all correspondence concerning this matter to the following:
	Kevin R. Brennan
	Name of Person  Saul Ewing Arnstein & Lehr LLC
	Firm/Company (7): (8): (9): (1): (1): (1): (1): (1): (1): (1): (1
	Address 55
	Boston, MA 02116
	City/State and Zip Code
	kevin.brennan@saul.com
	E-mail address: (to be used for future annual report notification)
or furth	er information concerning this matter, please call:
	Kevin R. Brennan 617 894-7836 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 \$\Bigcup \\$130.00 Filing Fee \& \Bigcup \\$155.00 Filing Fee \& \Bigcup \\$160.00 Filing Fee, Obstatus 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. Albany Road-Meridian Concourse LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.," or "L.L.C.,")

name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida. The a	lternate name must include "I.	imited Liabilit	y Company," \		or "L.l.C
Delaware		1	84-3155340			2019	
(Jurisdiction under the law of w	hich foreign limited hability company is organized)	3.		(FEI number,	if applicable)		<del>'</del>
					7000	87.	:
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration	i) liability)			PH L	: 1
155 Federal Street, Suite 1202 (Street Address of Principal Office)		6.	155 Federal Street,	Suite 1202	DENT DENT	-   4:45	
			(M	ailing Address	) ブ		
Boston, MA 02110		Boston, MA 02110					
							-
			<del> </del>				
Name and street address	ss of Florida registered agent: (P.O. Box	NOT:	acceptable)				
Name:	NRAI Services, Inc.						
name.			<del></del>				
Office Address:	1200 South Pine Island Road						
	Plantation		333	24			
			, Florida				

#### 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.

Patricia Belanger, Assistant Secretary
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: Albany Road REF II Property Manager LLC Manager Manager Manager 155 Federal Street, Suite 1202 Member Member Address: Boston, MA 02110 Authorized Authorized Person Person Other\_\_\_\_ Other\_ Other\_ Name: Manager ☐ Member Address: \_\_\_\_ Member Address: ■Authorized Authorized Person Person Other Other\_\_\_\_\_ Other\_\_\_ Other\_\_\_\_ Manager Manager Manager Name: Name: Member Address: ☐ Member 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 Brenda L. Bickham

Typed or printed name of signee

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ALBANY ROAD-MERIDIAN CONCOURSE 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-FOURTH DAY OF SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALBANY ROADMERIDIAN CONCOURSE LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF
SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN

Jeffrey W. Bullech, Secretary of State

Authentication: 203655277

Date: 09-24-19

7623315 8300 SR# 20197192206