1/29/2021

# Division of Corporations

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(((H21000040582 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023

Phone : (614)280-3338

Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## Foreign Limited Liability Company Liberty Construction Services, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

From; James Tanks III

Page, 3 of 5

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605.0002, FLORIDA STATUTEN, THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

rame unavailable, enter alternate in	ame adopted for the purpose of foresacting business in Fl	onda. I se alter	nate name must include "Lamited Evaluaty Co-	mpany," "L.L.C.; or "I
MA  (Jurisdiction under the law of which fereign limited lithility company is organized)		3. (FEI number, if applicable)		
		J	calie)	
January 27, 2021				
	Their first transmited business in Florida, if prior to iSec sections 665-0904 & 065-0903, F.S. to determ	registration ; ine penalty hab	it,ix)	
65 Allerton Street			Allerton Street	
eet Address of Principal (Miles)		ъ	(Mailing Address)	
Boston, MA 02445		Во	ostori, MA 02445	
				۲۰۰
		<del>.</del>		
Name and street addres	s of Florida registered agent (P.O. Box	: <u>NOT</u> acc	eptable)	3
				, T
Name:	C T Corporation System		<u>.</u>	~
Office Address.	1200 South Pine Island Road	<del> </del>		?
	Plantation		33324 , Florida	
	(CIN)		(Appende)	

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.

CT Corporation System

CT Corporation System

(Registered agent a signature) Sherry McGinnes, Assistant Secretary

From: James Tenks III

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]:

2021-01-29 12:37:09 CST

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:	
☑Manager	Name:	☐ Manager	Name: Melissa Velazquez	
□Member	Address: 65 Alterion Street	□ Member	Address:	
□Authorized	Boston, MA 02119	∑ Authorized	Pompano Beach, FL 33442	
Person		Person		
⊡Othei	Other	_ Other	Other	
∐Manager	Name: Henry Posadas	□Manager	Name: Kathleen L. Turland	
□Member	Address: 1505 N. Powerline Road	□ Member	Address: 65 Allerton Street	
<b>N</b> Authorized	Pompano Beach, FL 33442	∑ Authorized	Boston, MA 02119	
Person		Person		
□Other		Other		
			~ 1	
□Manager	Name:	□ Manager	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 filling 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.

Fashur Tr				
	Signature of an authorized person			
Kathleen 1., Turland				



William Francis Galvin Secretary of the Commonwealth

## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02138

January 27, 2021

## TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

## LIBERTY CONSTRUCTION SERVICES, LLC

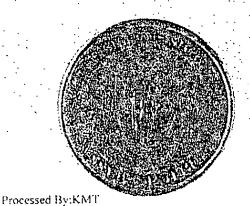
in accordance with the provisions of Massachusetts General Laws Chapter 156C on June 24, 2004.

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: JOHN FISH, PUNEET MAHAJAN, JAY J TANGNEY JR

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: JOHN FISH, PUNEET MAHAJAN, JAY J TANGNEY JR

The names of all persons authorized to act with respect to real property listed in the most recent filing are: JOHN FISH, PUNEET MAHAJAN, JAY J TANGNEY JR



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth