

Ma1000016757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

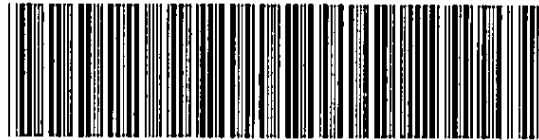
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/08/21--01015--014 **160.00

2021 DEC -8 AM 9:04

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TCD 236 Avian Pointe Property 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:

Michael Brodigan

Name of Person

Brodigan and Gardiner LLP

Firm/Company

40 Broad Street

Address

Boston MA 02109

City/State and Zip Code

mbrodigan@brodiganlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Brodigan

617 542-1871
at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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. TCD 236 Avian Pointe Property 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. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. pending
(FBI number, if applicable)

4. Not applicable
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. TCD 236 Avian Pointe Property LLC
(Street Address of Principal Office)

610 N. Wymore Road Suite 200

Maitland, FL 32751

6. TCD 236 Avian Pointe Property LLC
(Mailing Address)

610 N. Wymore Road Suite 200

Maitland, FL 32751

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

Name: Victoria Lackey

Office Address: 610 N. Wymore Road Suite 200

Maitland, FL 32751
(City) , Florida (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.

Victoria Lackey
(Registered agent's signature)

FILED
2021 DEC -8 AM 9:04
Maitland, FL

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: Peter Merrigan

☐ Member Address: Two International Place

☒ Authorized Boston, MA 02110

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Erik Rijnbout

☐ Member Address: Two International Place

☒ Authorized Boston, MA 02110

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Nancy Scotton

☐ Member Address: Two International Place

☒ Authorized Boston, MA 02110

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

**CERTIFICATE OF FORMATION
OF**

State of Delaware
Secretary of State
Division of Corporations
Delivered 04:10 PM 11/29/2021
FILED 04:10 PM 11/29/2021
SR 20213915613 - File Number 6432530

TCD 236 AVIAN POINTE PROPERTY LLC

This Certificate of Formation of **TCD 236 AVIAN POINTE PROPERTY LLC** dated as of November 29, 2021, is being duly executed and filed by Michael B. Brodigan, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. §18-101, et seq.).

FIRST: The name of the limited liability company is:

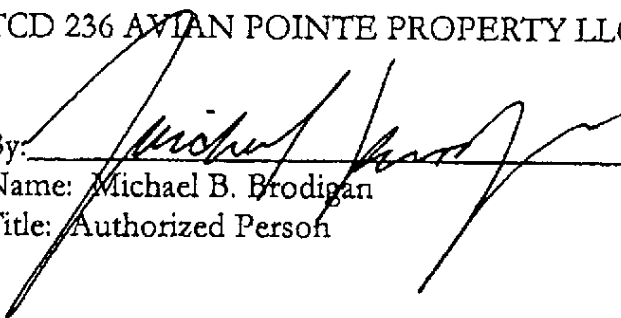
TCD 236 Avian Pointe Property LLC

SECOND The address of its registered office in the State of Delaware and the name and address of the Registered Agent are as follows:

Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation of TCD 236 Avian Pointe Property LLC as of this 29th day of November, 2021.

TCD 236 AVIAN POINTE PROPERTY LLC

By: 
Name: Michael B. Brodigan
Title: Authorized Person

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "TCD 236 AVIAN POINTE PROPERTY 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 THIRTIETH DAY OF NOVEMBER, A.D. 2021.



6432530 8300

SR# 20213915613

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204824395

Date: 11-30-21