## M82000/6641

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
(0.0) 0.000 0							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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Office Use Only



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2022 OCT 31 AM IO: 29

2022 OCT 31 ANTI: 47

T. LEMIEUX NOV 0 1 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 086434 7775081

AUTHORIZATION : Signal Del

COST LIMIT : \$ \frac{1}{2} \frac{1}{2} \frac{1}{2} 00

ORDER DATE: October 28, 2022

ORDER TIME : 9:51 AM

ORDER NO. : 086434-045

CUSTOMER NO: 7775081

\_\_\_\_\_\_

## FOREIGN FILINGS

NAME: 2300-2330 VILLAGE BOULEVARD

OWNER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

TO:

## **COVER LETTER**

го:	Registration Section Division of Corporations						
HR.II	2300-2330 Village Boulevard Owner	rLLC					
Name of Limited Liability Company							
		ity Company for Authorization to Transact Business in Florida," Certificate cove referenced foreign limited liability company to transact business in Florid					
Please	return all correspondence concerning this matter	er to the following:					
		Name of Person					
	Firm/Company						
Address							
	City/State and Zip Code						
E-mail address: (to be used for future annual report notification)							
For fur	ther information concerning this matter, please	call:					
		at () Area Code Daytime Telephone Number					
	Name of Contact Person	Area Code Daytime Telephone Number					
	Mailing Address:	Street Address:					
	Registration Section	Registration Section					
	Division of Corporations P.O. Box 6327	Division of Corporations					
	Tallahassee, FL 32314	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 D  \$\Bigsquare\$ \$125.00 Filing Fee \$\Bigsquare\$ \$130.00 Filing Certifications \$\Bigsquare\$	DEPARTMENT OF STATE					

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

IN COMPILANCE 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:

	oulevard Owner LLC				
(Name of Foreign	Limited Liability Company; must include "Limi	ited Liabilit	y Company," "L. L.C.," or "L.L.C.")		
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in	Florida The	alternate name must include "Limited Li	ability Company," "L.L	C," or "LLC.")
Delaware 2.			92-0818935 3.		
(Jurisdiction under the law of v	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		
4					
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605,0905, F.S. to deter	to registratio mine penalty	i) liability)		
4500 Dorr Street 5.		6.	4500 Dorr Street		
Toledo, OH 43615			(Mailing Address)		
			Toledo, OH 43615		
				<del></del>	
7 Name and street addre	ss of Florida registered agent: (P.O. Bo	w MOT	occantable)		
7. Ivanic and street addre	33 OF FIGHUA registered agent. (1.0. De	X <u>NOT</u>	eccptaore;	₩	200
Name:	Corporation Service Company			÷ ;	2022 OCT
0.00	1201 Hays Street			រ ម <u>ម</u>	FILED 31 <b>An 13</b> : 2.9
Office Address:				∰.i	
	Tallahassee		32301 , Florida		ਲ਼
(City)			(Zip code)		2.9
designated in this applica to comply with the provis	egistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prope	as regist	ered agent and agree to act i	n this capacity.	I further agree
and accept the obligation	s of my position as registered agent.  Corporation Service Company	ENE	ina Baholi		
	By:	7	Assistant Vice President		
	(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: **Title or Capacity:** Name and Address: Name and Address: Name: \_\_\_\_Matthew McQueen Mary Ellen Pisanelli □Manager □Manager 4500 Dorr Street 4500 Dorr Street ☐ Member □Member Toledo, OH 43615 Toledo, OH 43615 Authorized **■** Authorized Person Person □Other\_\_\_\_ Other □Other\_\_\_ Other\_\_\_\_\_ □Manager □ Manager Name: ☐ Member □Member Address: Address: ☐ Authorized ☐ Authorized Person Person Other\_\_\_ Other Other\_\_\_\_ □Other Name: \_\_\_\_\_ □Manager □Manager Name: Address: \_\_\_\_\_ Address: □Member ☐ Member ☐ Authorized ☐ Authorized Person Person □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 \$,817,155, F.S. 400558E340314EA Signature of an authorized person

Typed or printed name of signee

Mary Ellen Pisanelli



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

DELAWARE, DO HEREBY CERTIFY "2300-2330 VILLAGE BOULEVARD OWNER 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-EIGHTH DAY OF OCTOBER, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2300-2330

VILLAGE BOULEVARD OWNER LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF

OCTOBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 204733731

Date: 10-28-22