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(Address)

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(City/State/Zip/Phone #)

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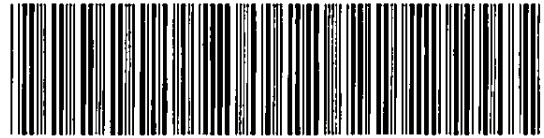
(Business Entity Name)

(Document Number)

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MAY 07 2024  
K. Brumley

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LAZ Parking Realty Investors II, 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:

John W. Beck, Esq.

\_\_\_\_\_  
Name of Person

Siegel, O'Connor, O'Donnell & Beck, P.C.

\_\_\_\_\_  
Firm/Company

One Financial Plaza, 755 Main Street, 2nd Floor

\_\_\_\_\_  
Address

Hartford, CT 06103

\_\_\_\_\_  
City/State and Zip Code

tsilverman@lprille.com

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

For further information concerning this matter, please call:

John W. Beck, Esq.

860

727-8900 ext. 208

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. LAZ Parking Realty Investors II, 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. Connecticut 92-054256  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. The Company has not yet transacted business in Florida.  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. Three Copley Place  
(Street Address of Principal Office)  
Suite 3202  
Boston, MA 02116-6503  
6. Three Copley Place  
(Mailing Address)  
Suite 3202  
Boston, MA 02116-6503

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

Name: CT Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(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.

CT Corporation System Theresa Buck, Assistant Secretary  
(Registered agent's signature)

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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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Alan Lazowski</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>c/o LAZ Karp Associates, LLC</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>1 Financial Plaza, 755 Main St, 14th Fl.</u>	<input type="checkbox"/> Authorized	_____
Person	<u>Hartford, CT 06103</u>	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____


<input checked="" type="checkbox"/> Manager	Name: <u>Jeffrey Karp</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>c/o LAZ Parking</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Three Copley Place, Suite 3202</u>	<input type="checkbox"/> Authorized	_____
Person	<u>Boston, MA 02116</u>	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Manager	Name: <u>Ted Silverman</u>	<input type="checkbox"/> Manager	Name: <u>Larry J. Stubbs</u>
<input type="checkbox"/> Member	Address: <u>c/o LAZ Parking Realty Investors, LLC</u>	<input type="checkbox"/> Member	Address: <u>c/o LAZ Parking Realty Investors, LLC</u>
<input checked="" type="checkbox"/> Authorized	<u>Three Copley Place, Suite 3202</u>	<input checked="" type="checkbox"/> Authorized	<u>Three Copley Place, Suite 3202</u>
Person	<u>Boston, MA 02116</u>	Person	<u>Boston, MA 02116</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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

John W. Beck, Esq.

\_\_\_\_\_  
Typed or printed name of signee

# Secretary of the State of Connecticut

## Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Wednesday, April 10, 2024 10:45 AM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

### Business Details

Business Name	LAZ Parking Realty Investors II, LLC
Business ALEI	US-CT.BER:2603098
Formation Date	07/22/2022



Secretary of the State