RI SOS Filing Number: 202461122950 Date: 11/14/2024 3:26:00 PM



# State of Rhode Island Office of the Secretary of State

Fee: \$150.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

# Foreign Limited Liability Company Application for Registration

(Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended)

#### **ARTICLE I**

The name of the limited liability company is: CC REIT SUB II, LLC

Enter your name exactly as it appears in your state. If your name includes an entity ending other than LLC or Limited Liability Company, complete Article II. The elected name in RI must include the entity ending LLC or Limited Liability Company.

### **ARTICLE II**

The name, if different, under which it proposes to register and transact business in Rhode Island is:

#### **ARTICLE III**

The Limited Liability Company is organized under the laws of: State: <u>DE</u> Country: <u>USA</u>

The date this Application for Registration is to become effective, not prior to, nor more than 90 days after the filing of this Application for Registration.

Later Effective Date: 11/14/2024

## **ARTICLE IV**

The date of its organization is: 11/29/2023

# **ARTICLE V**

The period of its duration is: X Perpetual

## **ARTICLE VI**

The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island:

No. and Street: 10 WEYBOSSET STREET

**SUITE 800** 

City or Town: PROVIDENCE State: RI Zip: 02903

Name: ROBERTS, CARROLL, FELDSTEIN & PEIRCE, INCORPORATED

# **Article VII**

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

# REAL ESTATE AND ANY LAWFUL BUSINESS FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE LAWS OF THE STATE OF RHODE ISLAND.

#### **ARTICLE VIII**

The Rhode Island Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

#### **ARTICLE IX**

The address of the office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized:

No. and Street: 396 WASHINGTON STREET

SUITE 300

City or Town: WELLESLEY HILLS State: MA Zip: 02481 Country: USA

#### **ARTICLE X**

The mailing address for the limited liability company is:

No. and Street: <u>396 WASHINGTON STREET</u>

SUITE 300

City or Town: WELLESLEY HILLS State: MA Zip: 02481 Country: USA

# **ARTICLE XI**

The limited liabilty company is to be managed by its \_\_\_Members\* or \_\_X\_Managers (check one)

\* If you checked to be managed by your MEMBERS (*the owners*) DO NOT complete the following section.

Only complete the following section if you checked to be managed by MANAGERS.

The name and address of each manager:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	COHOON CAPITAL MANAGEMENT LLC	396 WASHINGTON STREET, SUITE 300 WELLESLEY HILLS, MA 02481 USA

This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

1	
Signed	this 14 Day of November, 2024 at 3:27:02 PM by the Authorized Person.
PATRI	CK MCDONALD
Form No. 4 Revised 09	
	2024 State of Rhode Island Reserved



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

DELAWARE, DO HEREBY CERTIFY "CC REIT SUB II, 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-SIXTH DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CC REIT SUB II,

LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF NOVEMBER, A.D. 2023.

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

SECOND DE LA CONTROL DE LA CON

2686215 8300 SR# 20243798893

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

Authentication: 204494886

Date: 09-26-24

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

November 14, 2024 03:26 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

