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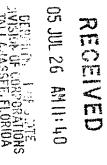


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07/26/05--01041--017 **125.00

07/26/05--01041--018 **30.00





FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)656-6446 OFFICE USE ONLY

WALK-IN

ENTITY NAME:

1. BPI MANAGEMENT, LLC

CK# 002008 for \$125.00 CK# 1663 for \$30.00

TOATAL \$155.00

PLEASE FILE THE ATACHED QUALIFICATION & RETURN THE FOLLOWING:

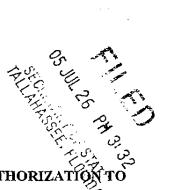
XXX CERTIFIED COPY

___ STAMPED COPY

___ CERTIFICATE OF STATUS

TRANSMITTAL LETTER

, ,						
TRANSMITTAL LETTER TO: Registration Section Division of Corporations						
TO: Registration Section						
Division of Corporations						
SUBJECT: BPi Management, LLC						
(Name of Limited Liability Company)						
(Maine of Emilion Elacinity 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:						
Problem 4.1 March						
Robert L. West						
(Name of Person)						
Boult, Cummings, Conners & Berry, PLC						
(Firm/Company)						
41600 Division Street, Suite 700						
(Address)						
Nashville, TN 37203						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Robert L. Westat (615252-2350						
(Name of Person) (Area Code & Daytime Telephone Number)						
STREET ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section						
Division of Corporations Division of Corporations						
409 E. Gaines Street P.O. Box 6327						
Tallahassee, Florida 32399 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:						
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of Status — Certified Copy of Status & Certified Copy						



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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BPI Management,		<u>.</u>	
	(Name of Foreign Limited	l Lia	ability Company)
2. Delaware		3.	20-2881996
(Jurisdiction under the company is organized	e law of which foreign limited liability 1)	,	(FEI number, if applicable)
1, 05/19/2005		5.	Perpetual
(Date	of Organization)	,	(Duration: Year limited liability company will cease to exist or "perpetual")
5.			en e
	(Date first transacted business in I (See sections 608.501 & 608.502 F.	S. t	ida, if prior to registration.) o determine penalty liability)
, 2002 Richard Jone	es Road, Suite 200A Nashville, TN	37	215
	(Shoret Addres	7	Principal Office)
	(Street Addres	SS 01	Principal Office)
. If limited liability	y company is a manager-manage	ed c	ompany, check here
·			<u> </u>
. The name and us	ual business addresses of the ma	ınaş	ging members or managers are as follows:
H Rodes Hart Ir	, Managing Member 2002 F	Rich	nard Jones Road, Suite 200A Nashville, TN 37215
11. I todes Halt of.	, wandging weithout 2002 i	(ICI	iard sortes Adad, Guite 250A (Nasiville, TN 57215
			ys old, duly authenticated by the official having custody of recon
_	- , ,		is not acceptable. If the certificate is in a foreign language, a
ansiation of the certifica	ate under oath of the translator must be su	ıbmı	ttea.)
Nature of busing	ess or purposes to be conducted	or r	promoted in Florida: real estate management
	,	- I	
	1821		
			orized representative of a member.
		, F.S	., the execution of this document constitutes
	 H. Rodes Hart Jr., Managing Me 	emb	er

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name o	f the Limited Liability	Company is:	
BPI Manageme	ent, LLC		
2. The name a	nd the Florida street ad	dress of the registered agent and office are:	
	NRAI Services, Inc.		
		(Name)	
	526 E. Park Avenue		
	Florida Str	eet Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		City/State/Zip	
liability compa agent and agre relating to the	my at the place designat te to act in this capacity. proper and complete pe my position as registered	nt and to accept service of process for the above stated limit ted in this certificate, I hereby accept the appointment as re, I further agree to comply with the provisions of all statute rformance of my duties, and I am familiar with and accept to d agent as provided for in Chapter 608, Florida Statutes.	gisterea s

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BPI MANAGEMENT, 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 TWENTIETH DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BPI MANAGEMENT, LLC" WAS FORMED ON THE NINETEENTH DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

050416568

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8300

DATE: 05-20-05