

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GREENBERG TRAURIG (ORLANDO)

Account Number : 103731001374 Phone : (407)418-2435 Fax Number : (407)420-5909 08 MAR 19 AM 8: 06

FLORIDA/FOREIGN LIMITED LIABILITY CO.

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BSH I Manager LLC

Certificate of Status	1
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Page Count	03
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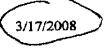
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EXAMINER



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. BSH I Manager LLC (Name of foreign lim	ited liability company)
2. Delaware	3. Applied For
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. March 12, 2008	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Acceptance	
(Date first transacted business in Florida. (See	sections 608.501, 608.502, and 817.155, F.S.)
7. c/o Bola Capital LLC. One Independent Drive.	Suite 1850
Jacksonville, Florida 32202	
(Street address o	f principle office)
If limited liability company is a manger-managed con The name and usual business addresses of the managed BSH Portfolio LLC	
c/o Bola Capital LLC	
One Independent Drive, Suite 1850	
Jacksonville, Florida 32202	
having custody of records in the jurisdiction under	more than 90 days old, duly authenticated by the official the law of which it is organized. (A photocopy is not uage, a translation of the certificate under oath of the
11. Nature of business or purposes to be conducted or finance, develop, lease, sell, exchapte and otherwise dis	
//m X 9	wins
Signature of a momber or an autho (in secondance with section 608,408(3), F.S. an affirmation under the penalties of perj	, the execution of this document constitutes

William G. Evans Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTER 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 of Limited Liability Company is:

BSH I Manager LLC

2. The name and the Florida street address of the registered agent and office are:

iaua

William G. Eyans (Name)

c/o Bola Capital LLC. One Independent Drive, Suite 1850 Florida street address (P.O. Box NOT ACCEPTABLE)

> Jacksonville, FL 32202 (City/State/Zip)

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

(Signature)

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

DIVISION OF CURPORATIONS



The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CORTIFY "BSR I MANAGER 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 THIRTEENTH DAY OF MARCH, A.D. 2008.

AND I DO BEREBY FURTHER CERTIFY THAT THE SAID "BSH I MANAGER LLC" MAS FORMED ON THE THELFTE DAY OF MARCH, A.D. 2008.

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

080308735 You may verify this certificate on Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6446755

DATE: 03-13-08