

F14000002591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

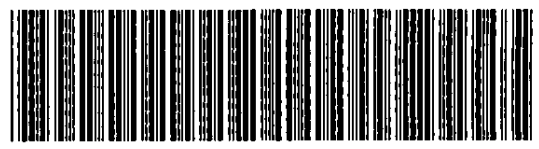
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/16/14--01020--009 **70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature] 06/17/14



BLACK KNIGHT™

June 4, 2014

Secretary of State - New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**Re: BKFS II Management, Inc.
Application by Foreign Corporation to Transact Business in Florida**

Dear Sir or Madam:

On behalf of the above-referenced company, enclosed are:

1. One original and one copy of the Application by Foreign Corporation to Transact Business in Florida; and
2. One original and one copy of a Certificate of Good Standing from its domicile State of Delaware; and
3. Our check number 2010251306 in the amount of \$70.00 as remittance of the requisite filing fee.

A self-addressed, stamped envelope is enclosed for your convenience in replying. If you have any questions regarding this filing, feel free to contact the undersigned.

Very truly yours,

Madeline G. M. Lovejoy
Assistant Vice President
Assistant Secretary
Corporate Legal Administrator
Telephone: (949) 622-5050
Facsimile: (949) 622-5060
E-mail: madeline.gm.lovejoy@fnf.com

Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BKFS II Management, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Madeline G. M. Lovejoy

Name of Person

BKFS II Management, Inc.

Firm/Company

2510 N. Redhill Ave

Address

Santa Ana, CA 92705

City/State and Zip code

madeline.gm.lovejoy@fnf.com

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

For further information concerning this matter, please call:

Madeline G. M. Lovejoy

at (949) 622-5050

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. BKFS II Management, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 80-0964695
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/04/2013 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 601 Riverside Ave., Jacksonville, FL 32204
(Principal office address)

601 Riverside Ave., Jacksonville, FL 32204
(Current mailing address)

8. Payroll company
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

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10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation 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.

C T Corporation System
By: [Signature]
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Michael L. Gravelle

Address: 601 Riverside Ave. Jacksonville, FL 32204

Director: _____

Address: _____

B. OFFICERS

President: Christopher F. Azur

Address: 601 Riverside Ave., Jacksonville, FL 32204

Vice President: Kirk T. Larsen

Address: 601 Riverside Ave., Jacksonville, FL 32204

Secretary: Michael L. Gravelle

Address: 601 Riverside Ave., Jacksonville, FL 32204

Treasurer: Daniel K. Murphy

Address: 601 Riverside Ave, Jacksonville, FL 32204

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. Michael L. Gravelle, Executive Vice President, General Counsel, and Secretary

(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BKFS II MANAGEMENT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF JUNE, A.D. 2014.

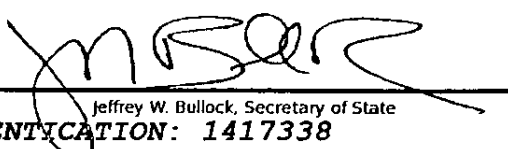
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TALLAHASSEE, FLORIDA

5443231 8300

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1417338

DATE: 06-02-14