(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:
W24-34300

Office Use Only



200421345912



MAR 1 5 2024 K. Brumbley



RECEIVED 2024 MAR 14 PM 3: 15

FLORIDA DEPARTMENT OF STATE CHASSEL, FLORIDA Division of Corporations

March 1, 2024

CSC

SUBJECT: BDG CORP.

Ref. Number: W24000034300

RESUBMIT

Please give original submission date as file date.

Letter Number: 224A00004547

We have received your document for BDG CORP. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones Regulatory Specialist II

www.sunbiz.org

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 02/29/24 Order #: 1440318-1 Re: BDG Corp.

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$78.75 - FL State Account Number:

120000000195

Certificate of Good Standing from State of Incorporation Could ble na

auth

Please take the following action:

File in your office on basis

Issue Proof of Filing

cert copy

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

TO:	Registration Division of 0							
SUBJ	ECT: BDG	Corp.						
		Name o	of corporation	- must i	nclude suffix	· · · · · · · · · · · · · · · · · · ·		
Dear S	ir or Madam:							
"Certif	ficate of Existe		of Good Stand	ding" an	d check are sub	ct Business in Florida," omitted to register the		
Please	return all corr	espondence concerni	ng this matter	to the fo	ollowing:			
Sharon	Nolan							
			Name of F	Person				
Black	Diamond Capita	ıl						
			Firm/Com	pany				
101 E I	Kennedy Blvd,	Suite 2100						
			Addre	ss				
Tampa	, FL 33602							
			City/State ar	id Zip c	ode			
snolan(	@blackdiamono							
		E-mail address	: (to be used fo	or future	annual report i	notification)		
For fur	ther informati	on concerning this m	atter, please ca	all:				
Sharon	Nolan		at ( 813	367-:	5281			
	Name of Per	rson	Area Code		Daytime Telep	hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Please 1		or the following amo able to: FLORIDA DE \$78.75 Filing Certificate o	EPARTMENT g Fee & 🗎	\$78.75	TE Filing Fee & ed Copy	S87.50 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.

(If name unava	Corp," "Inc," "Co," or "Corp.")	corporate name adop	Cosporation  oted for the purpose of transacting but	siness in Flo	orida)	
2. Delaware		ق	3082662 (FEI number, if applica			
	try under the law of which it is	,				
4. July 28, 2023		5	(Date of duration, if other than	<u></u>		
•			(Date of duration, if other than	perpetual)		
6. January 1, 202						
	(SEE SECTIONS 6	07.1501 & 607.1502,	orida, if prior to registration) F.S., to determine penalty liability)			
7. 101 E Kennedy	Blvd, Suite 2100, Tampa, FL	33602				
	· · · · · · · · · · · · · · · · · · ·	(Principal office <u>s</u>	reet address)			
PO Box 172111	7, Tampa,FL 33672					
		(Current mailing ad	dress, if different)			
	eet address of Florida registe  Corporation Service Comp	•	ox <u>NOT</u> acceptable)	. •	2024 FEB 29 MM 10:	
Name:	1201 Hays Street		_	* .	29	元2) 主5。
Office Address:	Tallahassee		- _ , Florida <u>32301</u>		OI 149	, -2
	(City)	, , , , , , , , , , , , , , , , , , , ,	(Zip code)		 	
Having been nai designated in thi further agree to	is application, I hereby acce comply with the provisions or with and accept the oblig	ept the appointment of all statutes relati ations of my positio	f process for the above stated cor as registered agent and agree to ive to the proper and complete pe on as registered agent.	act in this	capac	city. I
	Corporation Service Com By:	41: _				

10. 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.

### A. DIRECTORS Robert Rothman Charles Beale ■Chairman □ Chairman 101 E Kennedy Blvd, Suite 2100 101 E Kennedy Blvd, Suite 2100 ☐ Vice Chairman Address: ☐Vice Chairman Address: Tampa, FL 33602 Tampa, FL 33602 Director ■ Director □President □President ☐ Vice President ☐Vice President ☐ Secretary Treasurer □Secretary ☐ Treasurer □Other \_\_\_\_\_ Other Other □Other Name: Sharon Nolan Margaret Rothman □ Chairman □Chairmaл 101 E Kennedy Blvd, Suite 210 101 E Kennedy Blvd, Suite 2100 ☐ Vice Chairman Address: Address: □Vice Chairman Tampa, FL 33602 Tampa, FL 33602 Director □ Director □President □ President ☐Vice President □Vice President □ Secretary ☐ Treasurer Secretary □ Treasurer Other \_\_\_\_\_ Other \_\_\_\_ Other \_\_ □Other \_\_\_\_\_ □ Chairman Name: □ Chairman Name: □Vice Chairman Address: ☐ Vice Chairman Address: □Director □Director □ President □ President □Vice President ☐ Vice President ☐ Treasurer ☐ Secretary ☐ Treasurer ☐ Secretary □Other \_\_\_\_\_ Other \_\_\_\_ Other \_\_\_\_ Important Noffce; Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals really be added to the index when filting your Florida Department of State Annual Report form. The officer or director signing this document (and who is listed in number 11 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. Secretary

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

Page 1

# <u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "BDG CORP." 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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

SHOW, AS OF THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BDG CORP." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF JULY, A.D. 2023.

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

Authentication: 202907413

Date: 02-28-24

7589718 8300 SR# 20240764182