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From:

Account Name : GREENBERG TRAURIG (ORLANDO).

Account Number : 103731001374

Phone

: (407)418-2435

Fax Number

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ORIDA/FOREIGN LIMITED LIABILITY CO.

BSH Owner LLC

Certificate of Status	1
Certified Copy	1
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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

ited liability company)	
3. Applied For	-
(FEI number, if applicable)	and and the Ear.
5. Perpetual	25
(Duration: Year limited liability company will cease to exist or "perpetual")	Control of the Control
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ring members or managers are as follows:	ATIONS
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more than 90 days old, duly authenticated by the official the law of which it is organized. (A photocopy is not mage, a translation of the certificate under oath of the promoted in Florida: Acquire, hold, operate, manage, pose of real estate located in Florida.	
	(FEI number, if applicable) 5 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") sections 608 501, 608 502, and 817 155, FS) Suite 1850 6 principle office) In pany, check here ing members or managers are as follows: 20 30 31 32 33 34 35 36 37 37 38 38 38 48 48 48 48 48 48 48

Signature of a member or an authorized representative of a member (in accordance with section 608 408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

William G. Evans

Typed or printed name of signee

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CERTIFICATE OF DESIGNATION OF REGISTER AGENT/REGISTERED OFFICE

PURSUANI 10 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 Owner LLC

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

William G. Evans
(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.

Simature)

\$100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) H07000094025 3

Delaware

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BSH OWNER 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 FIFTH DAY OF APRIL, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BSH OWNER LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF MARCH, A.D. 2007. AND I DO BEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE and

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AUTHENTICATION: 5570343

DATE: 04-05-07

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