Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations: A Control of the State of the S

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From:

Account Name : GREENBERG TRAURIG . (ORLANDO)

Account Number : 103731001374 Phone

: (407)418-2435

Fax Number

: (407)420-5909

AI

FLORIDA/FOREIGN LIMITED LIABILITY CO.

BCK Owner LLC

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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

1. BCK Owner LLC	ted liability company)
(Name or roterky time	ded materity company)
2. Delaware	3 Applied For
(Jurisdiction under the law of which foreign limited	(FEI number, if applicable)
liability company is organized)	$\epsilon = 1$. ϵ^{*}
4 May 14, 2007	5 Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease
•••	to exist or "perpetual")
£ 17 Annual	Zs 2
6 Upon Acceptance (Date first transacted business in Florida (See	services 608 501 608 507 and 917.155 E 94
(Date that flamatical boatless in Piorida (See	# 17 E
7 c/o Eola Capital LLC, One Independent Drive, S	Suite 1850
Jacksonville, Florida 32202	SEX 22
(Street address of	principle office)
	Superproduction of the state of
8. If limited liability company is a manger-managed con	npany, check here 🛛 💮 😓 👵
The name and usual business addresses of the managi BCK Manager LLC c/o Bola Capital LLC	ng members or managers are as follows:
One Independent Drive, Suite 1850	
Jacksonville, Florida 32202	
	the law of which it is organized. (A photocopy is not tage, a translation of the certificate under oath of the
finance, develop, lease, sell, exchange and otherwise disp	
// pu Sil	laus-
Signature of a member or an author (in accordance with section 608 408(3), F.S.,	
an affirmation under the penalties of perje	

William G. Evans
Typed or printed name of signee

1 The name of Limited Liability Company is:

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CERTIFICATE OF DESIGNATION OF REGISTER AGENT/REGISTERED OFFICE

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

BCK Owner LLC	
2. The name and the Florida street addr	s of the registered agent and office are:
erson en general en	William G. Evans (Name)

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

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

 \triangleright

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 registenedgagent as provided for in Chapter 608, F.S.

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

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Delaware

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BCK 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 SIXTEENTH DAY OF MAY, A.D. 2007.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BCK OWNER LLC" WAS FORMED ON THE FOURTEENTH DAY OF MAY, A.D. 2007.

4351438 8300 070571878



Warriet Smith Window Harriet Smith Windows Secretary of State

DATE: 05-16-07

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