# M1200002736

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
l				

Office Use Only



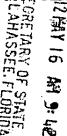
300234907633

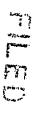
DEPARTMENT OF STATE

T. CLINE

MAY 1 7 2012

EXAMINER







ION SERVICE COMPANY"
ACCOUNT NO. : 12000000195
REFERENCE : 206501 4804708
AUTHORIZATION: Spelle man
COST LIMIT : \$ 125.00
ORDER DATE: May 16, 2012
ORDER TIME : 3:0 PM
ORDER NO. : 206501-005
CUSTOMER NO: 4804708
FOREIGN FILINGS
NAME: BST NORTHPOINTE, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u> )
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Becky Peirce EXT# 2919  EXAMINER:  SRY 55
SSEE TO THE TENT OF THE TENT O

#### COVER LETTER

	Division of Corporati	ions				
SUBJEC	BST Northpo	ointe, LLC				
		Name	of Limited Liability Co	mpany		
				zation to Transact Business in Florida, nited liability company to transact busi		
Please re	tum all corresponden	ce concerning this matte	er to the following:			
	Susan G.	Schneider				
			Name of Person			
	Seward &	& Kissel LLP				
			Flrm/Company			
	One Batt	ery Park Plaza				
	<del></del>		Address			
	New Yor	k, New York 10004	ļ.			
			City/State and Zip Code			
	schneider	@sewkis.com				
		E-mail address: (to	be used for future annua	l report notification)		
For furth	er information concer	ning this matter, please	call:			
	Susan G. Schneid	ler	at (212	574-1389		
•	Nan	ne of Person	Area Code & Daytim	e Telephone Number		
-	MAILING ADDRES		STREET ADDRESS: Division of Corporations	ı		
	Registration Section P.O. Box 6327		Registration Section Clifton Building			
	Tallahassee, FL 32314	4 2	2661 Executive Center C	lirole		
~ ·			Fallahassee, FL 32301		SEC SEC	
		e following amount [3130.00 Filing Fee 6 Certificate of Status	&\$155.00 Filing F	ee & S160.00 Filing Fee, Certification of Status & Certified Copy	DIZ MAY 16 SECRETARY LUCAHASSE	MENGLES IN
					EI C	haden t
					FLO	141
					ATE ORIDA	Tana d
					<b>≥</b> 160	

### 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: BST Northpointe, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LIC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) May 4, 2012 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) Upon filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 411 West Putnam Avenue, Suite 425, Greenwich, Connecticut 06830 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Northpointe Partners, LLC 411 West Putnam Ave., Suite 425, Greenwich, Connecticut 06830 10. Attached is an original cartificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the unisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Acquiring real estate 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

Gil Tenzer, Member of the Managing Member of the LLC

penalties of perjury that the facts stated berein are true. I am aware that any 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.)

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED 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	the Limited Liability (	Company is:	
BST Northpo	inte, LLC		- <del> </del>
If unavailable, t	he alternate to be used	in the state of Florida is:	
2. The name an	d the Florida street add	dress of the registered agent and office are	;
	Corporation Service Co	отрапу	
		(Namo)	····
	1201 Hays Street		
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassec	FL 32301	
		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, Florida Statutes.

Corporation Service Company

By: Jacqueline N. Rasper, Assistant VP
(Signature)

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

5 5.00 Certificate of Status (optional)

ECRETARY OF STATE LEAHASSEE, FLORIDA

# Delaware

PAGE

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BST NORTHPOINTE, 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. 2012.

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 "BST NORTHPOINTE, LLC" WAS FORMED ON THE FOURTH DAY OF MAY, A.D. 2012.

5150065 8300

120575792

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9576629

DATE: 05-16-12

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