

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

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**To:**

Division of Corporations  
 Fax Number : (850) 617-6383

**From:**

Account Name : GARDNER BREWER MARTINEZ-MONEFORT  
 Account Number : I20060000058  
 Phone : (813) 221-9600  
 Fax Number : (813) 221-9611

2014 MAY 14 AM 10:09  
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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address:

cbrower@gbmmmlaw.com

**Foreign Limited Liability Company**  
**BCDC BP Jax, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

MAY 15 2014

A. LUNT

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5/14/2014 1:57:48 PM PAGE 1/001 Fax Server



May 14, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GARDNER BREWER MARTINEZ-MONFORT, P.A.

SUBJECT: BCDC BP JAX, LLC  
REF: W14000030536

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TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Agnes Lunt  
Regulatory Specialist II

FAX Aud. #: H14000114130  
Letter Number: 014A00010388

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **BCDC BP Jax, LLC**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

**Christopher W. Brewer**

Name of Person

**Gardner Brewer Martinez-Monfort, P.A.**

Firm/Company

**400 North Ashley Drive, Suite 1100**

Address

**Tampa, FL 33602**

City/State and Zip Code

**cbrewer@gbmmlaw.com**

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

For further information concerning this matter, please call:

**Christopher Brewer**

Name of Contact Person

**813**

Area Code

**221-9600**

Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. **BCDC BP Jax, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. **Georgia**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. **400 Galleria Parkway, Suite 1900**

**Atlanta, Georgia 30339**

(Street Address of Principal Office)

6. **400 Galleria Parkway, Suite 1900**

**Atlanta, Georgia 30339**

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**Mike G. Hood, Manager**

**400 Galleria Parkway, Suite 1900, Atlanta GA 30339**

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction 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 oath of the translator must be submitted)



Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein 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

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

**BCDC BP Jax, LLC**

If unavailable, the alternate to be used in the state of Florida is:

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

**Christopher W. Brewer**

(Name)

**400 N. Ashley Drive, Suite 1100**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Tampa**

**FL 33602**

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 605, Florida Statutes.*



(Signature)

\$ 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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**STATE OF GEORGIA**

Secretary of State  
Corporations Division  
313 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 14044084  
DATE INC/AUTH/FILED : May 07, 2014  
JURISDICTION : Georgia  
PRINT DATE : May 08, 2014

**CERTIFICATE OF EXISTENCE**

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

BCDC BP Jax, LLC  
A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Brian P. Kemp  
Secretary of State

Tracking #: pZM7pHLR

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