Division of Corporations Electronic Filing Cover Sheet

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(((H14000229996 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

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: (813)228-9401

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### Foreign Limited Liability Company BuildingPoint Florida, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

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Help

OCT - 2 2014

10/1/2014

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#### **COVER LETTER**

TO: Registra Division	ation Section 1 of Corporations
Bu SUBJECT:	illdingPoint Florida, LLC
	Name of Limited Liability Company
The enclosed "Ap Existence, and ch	oplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of seck are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all c	correspondence concerning this matter to the following:
	Mitchell I. Horowitz
•	Name of Person
	Buchanan Ingersoll & Rooney PC
•	Firm/Company
	501 E. Kennedy Blvd. Ste. 1700
`	Address
	Tampa, FL 33602
	City/State and Zip Code
	mitchell.horowitz@bipc.com
	E-mail address: (to be used for future annual report notification)
	nation concerning this matter, please call:  B13 222-1105
· <del>· · · · · · · · · · · · · · · · · · </del>	Name of Contact Person Area Code Daytime Telephone Number
Division Registra P.O. Box	NG ADDRESS:  of Corporations  Division of Corporations tion Section  Registration Section  k 6327  Clifton Building see, FL 32314:  2661 Executive Center Circle Tallahassee, FL 32301
	Check for the following amount:  00 Filing Fee  \$\Bigsim \$\subseteq \text{\$\subseteq \seteq \text{\$\subseteq \seteq \text{\$\subseteq \seteq \seteq \text{\$\subseteq \seteq \seteq \seteq \seteq \text{\$\subseteq \seteq \s

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1.	orida, LLC	olude "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Pore	ogn Emissed Elability Company; must inc	
(If name unavailable, enter a Liability Company," "L.L.C,	ilternate name adopted for the purpose of	transacting business in Florida. The alternate name must include "Limited
Delaware 2.		47-1879691
(Jurisdiction under the law company is organized)	v of which foreign limited liability	(FEI number, il applicable)
Date of filling		
	(Date first transacted business i	in Florida, if prior to registration.)  5, F.S. to determine penalty liability)
5	fabry Hwy., Ste. A	
Tampa, FL 3361		
11015 N. Dale M.	abry Hwy., Ste. A	ss of Principal Office)
Tampa, FL 3361	0	
, . = = =	8	
	,	iling Address)
	(Mai	rson(s) who has/have authority to manage is/are:
7. The name, title or	capacity and address of the per ager ry Hwy., Ste. A	rson(s) who has/have authority to manage is/are:
7. The name, title or Corey Meyer, Mana	(Mai capacity and address of the pe ager	rson(s) who has/have authority to manage is/are:

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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), FLÖRIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liabi t Florida, LLC	lity Company is:	THOCK!
If unavailable,	the alternate to be t	used in the state of Florida is:	35 F. O. T. S.
2. The name a	and the Florida stree	t address of the registered agent and office	are:
		(Name)	· · · · · · · · · · · · · · · · · · ·
	11015 N. Dale I	Mabry Hwy., Ste. A	
	Florid	a Street Address (P.O. Box NOT ACCEPTABLE)	
	Tampa	33618 FL	
	•	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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# Delaware

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### The First State

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

DELAWARE, DO HEREBY CERTIFY "BUILDINGPOINT FLORIDA, 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BUILDINGPOINT FLORIDA, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2014.

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

5605503 8300

141240287

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

AUTHENT CATION: 1742391

DATE: 09-30-14