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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 620851 4347023 AUTHORIZATION, COST LIMIT (: ORDER DATE: May 7, 2015 ORDER TIME : 2:20 PM ORDER NO. : 620851-010 CUSTOMER NO: 4347023 FOREIGN FILINGS NAME: BF VAMF II GP LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY __ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Lydia Cohen -- EXT# 62974

COVER LETTER

	Registration Section Division of Corporatio	ns					
SUBJEC	BF VAMF II GP LI	LC					
Q (2/4 224)		Name of Limited Liability Company					
The enclo Existence,	sed "Application by For , and check are submitte	reign Limited Liability Comp ed to register the above refere	pany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida	
Please reti	urn all correspondence o	concerning this matter to the	following:				
Name of Person							
Firm/Company							
Address							
City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further	r information concerning	g this matter, please call:					
~~	Name o	f Contact Person	at () Dayt	ime 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				
	s a check for the follow. 3 \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	g Fee &	□ \$160.00 Filing Fee, Cer of Status & Certified Copy		

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: BF VAMF II GP 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 "LI.C.") 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) date of registration (Date first transacted business in Florida, if prior to registration,) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5510 Morehouse Drive, Suite 200 San Dicgo, CA 92121 (Street Address of Principal Office) 5510 Morehouse Drive, Suite 200 San Diego, CA 92121 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) (Zip code) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relatife to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as r Lydia Cohen (Registered agent's signature) 3. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Christopher E. Hashioka, President and CEO; Jon A. MacDonald, General Counsel and SVP; Gregory R. Pinkalla, CFO and SVP - 5510 Morehouse Drive, Suite 200, San Diego, CA 92121 and Thomas Brunson, Vice President -7301 N. State Highway 161, Suite 260, Irving, Texas 75039

9 Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under outh 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.)

Sardra Hill Flood, Via Hosidant and ASST. Secy.

Typed or printed name of signee

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "BF VAMF II GP 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 SECOND DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BF VAMF II GP LLC" WAS FORMED ON THE SECOND DAY OF JULY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 2261046

DATE: 04-02-15

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