

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| | Division of Com | rporations | 5-1 <u></u> |
| | Fax Number | : (850)617-6383 | |
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| From: | | | 1.1 |
| | Account Name | : C T CORPORATION SYST | 'EM |
| | Account Number | : FCA000000023 | |
| | Phone | : (850)205-8642 | 5 <u>5</u> € |
| | Fax Number | : (850)878-5368 | ; · |

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

| Email | Address: | | | | | |
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Foreign Limited Liability Company BMHCP Homes LLC

Certificate of Status 0

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Estimated Charge \$125.00

J. HARRIS

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Corporate Filing Menu

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COVER LETTER

| NUBJEC | BMHCP Homes L | LC | | | | |
|--|--|---|---------------------|-----------|---------------------------|-----------|
| 10242 | | Name of | Limited Liability | Company | | |
| | | preign Limited Liability Com led to register the above refer | | | | |
| lease ro | turn all correspondence | concerning this matter to the | following: | | | |
| | Adriana Henq | nen | | | | |
| | | N | ame of Person | | | |
| | Brown Rudnic | k LLF | | | | |
| | | F | irm/Company | | | |
| | One Financial | Centor | | | | |
| | | | Address | | | |
| | Boston, MA 0 | 2111 | | | | |
| | | City/S | tate and Zip Code | | | |
| | ahenquen@brov | vnrudnick.com | | | | |
| | | E-mail address: (to be use | d for future annual | report no | tification) | |
| or furth | er information concernit | ng this matter, please call: | | | | |
| Adriana Henquen | | 617 | 856-85 | 31 | | |
| | Name | of Contact Person | Area Code | Day | rime 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 Tallabassee, FL 32301 | | | | |
| | is a check for the follow I \$125.00 Filing Fee | ving amount: ☐ \$130.00 Filing Fee & | □ \$155.00 Filia | a Pee & | □ \$160.00 Filing Fee, Ce | atificate |

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: I. BMHCP Homes LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," L.C.C.," or "LLC.") (It 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. Delaware 3. 81-2561859 (lurisdiction under the law of which foreign limited liability (FEI number, if applicable) N/A (Date first transacied by sines in Flo (Sco sections 605.0904 & 605.0905, P 650 Fifth Avenue, 16th Floor, New York, New York 10019 (Street Address of Principal Office) 650 Fifth Avenue, 16th Floor, New York, New York 10019 (Mailing Address) 7. Name and street alldress of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the pravisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

CT Corporation System (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc: Paul Gojkovich III, Managing Partner, 650 Fifth Avenue, 16th Floor, New York, New York 10019 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. [Mitho certificate is fine foreign language, a translation of the certificate under oath of the translator must be submitted)/ Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am sware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a 817.155, F.S.

Typed or printed name of aignee

Paul Gojkovich III



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BMHCP HOMES 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 ELEVENTH DAY OF AUGUST, A.D. 2016.

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

6035434 8300 SR# 20165318405

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

Jehrey W. Budlet Secretary of State 3

Authentication: 202809499

Date: 08-11-16