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VIA FEDERAL EXPRESS

November 17, 2016

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

RE:

Application by Foreign Limited Liability Company for Authorization to Transact

Business in Florida for PAVILION BHP-JACKSONVILLE, LLC

PROJECT:

BHP 3022 Faye Road, Jacksonville, FL

Dear Sir or Madame:

Please find enclosed herewith one executed original and one copy of Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above-referenced LLC entity. I have also enclosed a Certificate of Existence for this entity from the North Carolina Secretary of State. Please file this in your office and return a copy to my office. I have also enclosed Check No. 14884 for \$125.00 representing the filing fee for this transaction.

If you should have any questions or comments respecting this, please do not hesitate to contact me at 704-944-5957. Thank you for your assistance in this matter.

Sincerely,

Pavilion Development Company

Mellu Brones

Mollie J. Brown

Paralegal

Enclosures

COVER LETTER

TO:	Registration Section Division of Corporations	•			
SUBJE	Pavilion BHP-Jacksonville,				
SCBI	.CI:		Limited Liability C	ompany	
					nsact Business in Florida," Certificate of company to transact business in Florida
Please	return all correspondence concerni	ing this matter to the	following:		
	Mollie J. Brown				
		Na	nme of Person		
	Pavilion Development	Company			
		Fi	rm/Company		
	5605 Carnegie Boulev	ard, Suite 110			
			Address	-	
	Charlotte, NC 28209				
		City/S	tate and Zip Code		
	mb@pavdevco.com				
	E-ma	il address: (to be used	d for future annual	report not	ification)
For fur	ther information concerning this n	natter, please call:			
	Mollie J. Brown		704 at (944-595	57
	Name of Conta	act Person	Area Code	Day	time Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle see, FL 32301
Enclos		ount: 30.00 Filing Fee & ificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	□ \$160.00 Filing Fee, Certificate 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:

f name unavailable, enter al lability Company," "L.L.C,	Iternate name adopted for the purpose of transac	ting business in Florida. The alternate name	must include	e "Limi
North Carolina	3			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)		
·				
	(Date first transacted business in Florid (See sections 605.0904 & 605.0905, F.S.	la, if prior to registration.) to determine penalty liability)		
c/o Pavilion Developm	nent Company			
5605 Carnegie Boulev	ard, Suite 110 Charlotte, NC 28209			
	(Street Address of Principal O	ffice)	د چينسنا د ايم	3
c/o Pavilion Developm	ent Company			81 AON
	ard, Suite 110 Charlotte, NC 28209			
	(Mailing Address)			PH
Name and street address	ss of Florida registered agent: (P.O. Box <u>N</u>	NOT accentable)	(*************************************	
	Todd O. Carr	to 1 acceptable)	Š	ၾ
Name:	2929 Alamo Drve			
Office Address:				
Office / tudicos.				
Office findings.	Orlando	, Florida <u>32805</u>		
tegistered agent's accep	otance:	, Florida 32805 (Zip code)	tv company	v at the
Registered agent's accep laving been named as re lesignated in this applica to complywith the provisi	otance: egistered agent and to accept service of pro- ation, I hereby accept the appointment as r ions of all statutes relative to the proper an imy position as registered agent.	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, a	capacity.	I furth
Registered agent's accep laving been named as re lesignated in this applica to complywith the provisi	otance: egistered agent and to accept service of pro ation, I hereby accept the appointment as r ions of all statutes relative to the proper an	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, a	capacity.	I furth
degistered agent's acceptaving been named as resignated in this applicate complywith the provisic coupt the obligations of	otance: egistered agent and to accept service of pro- ation, I hereby accept the appointment as r ions of all statutes relative to the proper an imy position as registered agent.	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, and complete performance of my duties are also and complete performance of my duties.	capacity.	I furth
Registered agent's acceptaving been named as relesignated in this applicate complywith the provising the obligations of	otance: egistered agent and to accept service of pro- ation, I hereby accept the appointment as r ions of all statutes relative to the proper an my position as registered agent. (Registered agent) eacity and address of the person(s) who has/	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, and complete performance of my duties are also and complete performance of my duties.	capacity.	I furth
Registered agent's acception to the lessing been named as realesignated in this applicate comply with the provision of the obligations of the lessing	otance: egistered agent and to accept service of prodution, I hereby accept the appointment as regions of all statutes relative to the proper and my position as registered agent. (Registered agent accity and address of the person(s) who has/ompany, sole Manager	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, and complete performance of my duties are also and complete performance of my duties.	capacity.	I furth
Registered agent's acception to the lessing been named as replaced in this application comply with the provision of the obligations of the lessing the	otance: egistered agent and to accept service of prodution, I hereby accept the appointment as regions of all statutes relative to the proper and my position as registered agent. (Registered agent accity and address of the person(s) who has/ompany, sole Manager	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, and complete performance of my duties are also and complete performance of my duties.	capacity.	I furth
Registered agent's accepted a serving been named as relesignated in this application comply with the provision of the obligations of the service of the obligations of the provision Development Company (Second Company). Attached is a certificate of the service o	egistered agent and to accept service of prodution, I hereby accept the appointment as reions of all statutes relative to the proper and my position as registered agent. (Registered agent accity and address of the person(s) who has/ompany, sole Manager d, Suite 110	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, of a signature) Thave authority to manage is/are:	capacity. and I am f	I furth amilia
Registered agent's acceptaining been named as relessignated in this applicate of complywith the provision of the obligations of the complywith the provision of the complywith the complex of the	egistered agent and to accept service of prodution, I hereby accept the appointment as reions of all statutes relative to the proper and my position as registered agent. (Registered agent accity and address of the person(s) who has/ompany, sole Manager d, Suite 110	ocess for the above stated limited liability registered agent and agree to act in this and complete performance of my duties, and complete performance of my duties.	capacity. and I am f	I furth amilia

Typed or printed name of signee

Richard M. Davies



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

PAVILION BHP-JACKSONVILLE, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 16th day of November, 2016, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 16th day of November, 2016.

Elaine I. Marshall

Secretary of State

Certification# 99397301-1 Reference# 13409176- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification

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:

Pavilion BHP-Jacksonv			
(Name of Fore	ign Limited Liability Company; must include	'Limited Liability Company," "L.L.C" or	"LLC.")
If name unavailable, enter all Liability Company," "L L.C,"	ternate name adopted for the purpose of transactor "LLC.")	cting business in Florida. The alternate nan	ne must include "Limited
North Carolina	3		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
I	(Date first transacted business in Flori-	da if prior to registration)	-
	(See sections 605.0904 & 605.0905, F.S.	to determine penalty liability)	
5. c/o Pavilion Developm	lent Company		-
5605 Carnegie Bouleva	ard, Suite 110 Charlotte, NC 28209		
	(Street Address of Principal C	Office)	-
5. <u>c/o Pavilion Developme</u>	ent Company		.
5605 Carnegie Bouleva	ard, Suite 110 Charlotte, NC 28209		
	(Mailing Address)		_
7. Name and street addres	s of Florida registered agent: (P.O. Box)	<u>NOT</u> acceptable)	
Name:	Todd O. Carr		
	2929 Alamo Drve	 _	
Office Address:	Orlando	22805	
	(City)	, Florida 32805 (Zip code)	-
Registered agent's accept		(Zip code)	
lesignated in this applicate to complywith the provision	gistered agent and to accept service of prition, I hereby accept the appointment as a ons of all statutes relative to the proper any position as registered agent.	registered agent and agree to act in th	is capacity. I further agree
	(Registered agent	's signature)	_
8. The name, title or capa Pavilion Development Co	acity and address of the person(s) who has/ empany, sole Manager	/have authority to manage is/are:	
5605 Carnegie Boulevard,	, Suite 110		
Charlotte, NC 28209			
	of existence, no more than 90 days old, do of which it is organized. (If the certificate abmitted)		
	Signature of an auth	norized person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b) the Department of State constitutes a third	(b), Florida Statutes. I am aware that an d degree felony as provided for in s.817	y false information 7.155, F.S.
	Richard M. Davies		

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

PAVILION BHP-JACKSONVILLE, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 16th day of November, 2016, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 16th day of November, 2016.

Secretary of State

6 laine I Marshall

Certification# 99397301-1 Reference# 13409176- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification