

Jan 19 2017 03:25PM

Fax

page

M17000000553

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H16000315619 3)))



H1600031561934BC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : MARIN, ELJAIK, & LOPEZ, PL
Account Number : I20030000013
Phone : (305)444-5969
Fax Number : (305)444-1939

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

Email Address: INFO@MELLANVERS.COM

RECEIVED
2017 JAN 19 PM 3:17
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company
BGI Fund I, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

W17-4644 2871

JAN 20 2017

Electronic Filing Menu

Corporate Filing Menu

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BGI FUND I, LLC, A FLORIDA LIMITED LIABILITY COMPANY

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:

CARLOS A. MARIN

Name of Person

MARIN, ELJAIK & LOPEZ, P.L.

Firm/Company

2601 S. BAYSHORE DRIVE, SUITE 850

Address

COCONUT GROVE, FL 33133

City/State and Zip Code

CM@MELLAWEYERS.COM

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

For further information concerning this matter, please call:

CARLOS A MARIN

305

444-5969

Name of Contact Person

at (_____)_____
Area Code

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

**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:

1. **BQI FUND I, LLC, A LIMITED LIABILITY COMPANY**

(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. **DELAWARE**

(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. **175 SW 7TH STREET, SUITE 2208**

MIAMI, FL 33130

(Street Address of Principal Office)

6. **175 SW 7TH STREET, SUITE 2208**

MIAMI, FL 33130

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **MELLAW REGISTERED AGENTS LLC**

Office Address: **2601 S. BAYSHORE DRIVE, SUITE 850**

COCONUT GROVE

(City)

, Florida **33133**

(Zip code)

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 comply with the provisions 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.

(Registered agent's signature)

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

KENNETH BABOUN

MANAGER

175 SW 7TH STREET, SUITE 2208, MIAMI, FL 33130

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 oath of the translator must be submitted)

(Signature of authorized person)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

CARLOS A. MARIN

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BGI FUND I, LLC, A LIMITED LIABILITY COMPANY" 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 TWENTIETH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BGI FUND I, LLC, A LIMITED LIABILITY COMPANY" WAS FORMED ON THE THIRTEENTH DAY OF DECEMBER, A.D. 2016.

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



6248932 8300

SR# 20170352441

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock Secretary of State" is printed.

Authentication: 201904357

Date: 01-20-17

STATE OF DELAWARE
CERTIFICATE OF FORMATION
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is BGI Fund I, LLC, a limited liability company

2. The Registered Office of the limited liability company in the State of Delaware is located at 2711 Centerville Road, Suite 400 (street), in the City of Wilmington, Zip Code 19808. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is Corporation Service Company

By: 
Authorized Person

Name: Carlos A. Marín, Esq.
Print or Type