

H170001016153

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H170001016153CVV

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To:

Division of Corporations
Tax Number : 00000000000000000000

From:

Account Name : TAXIDELTACOM INC
Account Number : 10014000000000000000
Phone : (305) 941-0000
Fax Number : (305) 941-0000

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

Email Address:

Foreign Limited Liability Company

BNF LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$125.00 |

RECEIVED
2017 MAY 23 PM 12:13
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TALLAHASSEE, FLORIDA

FILED
17 MAY 23 PM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H170001016153

D. SCOTT

MAY 24 2017

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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. BNP 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 "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-4416784

(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. 14334 BISCAYNE BLVD

NORTH MIAMI, FL 33181

(Street Address of Principal Office)

6. 14334 BISCAYNE BLVD

NORTH MIAMI, FL 33181

(Mailing Address)

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

Name: ROMAR INTERNATIONAL LLC

Office Address: 14334 BISCAYNE BLVD

NORTH MIAMI

(City)

Florida 33181

(Zip code)

Registered agent's acceptance:*Having been named as registered agent and in 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:

WILLIAM MARIANO - MEMBER - 14334 BISCAYNE BLVD NORTH MIAMI, FL 33181

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 an 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.

WILLIAM MARIANO

Typed or printed name of signer

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Delaware
The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BNF 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
FOURTH DAY OF MAY, A.D. 2017.

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TALLAHASSEE, FLORIDA



6208321 8300

SR# 20173092476

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202489069

Date: 05-04-17

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