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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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SECRETARY OF STATE

MECETAPAGE STATE

INO 1 28th PARPERS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 651043, 4322088

AUTHORIZATION Spelle Man

COST LIMIT : 125.00

ORDER DATE: May 19, 2017

ORDER TIME : 12:56 PM

ORDER NO. : 651043-010

CUSTOMER NO: 4322088

FOREIGN FILINGS

NAME: BIR CORAL GABLES II, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:

Registration Section
Division of Corporations

| CID TECT. | BIR Coral Gables II, L.L. | С. | | | | | | |
|---|--|---|--|---|-------------------------------------|--|--|--|
| SUBJECT: BIR COLAI GABLES II, E.L.C. Name of Limited Liability Company | | | | | | | | |
| The enclosed ". Existence, and | Application by Foreign Limited Liability Comcheck are submitted to register the above refer | pany for Authoriz enced foreign limi | ation to Tr ted liabilit | ansact Business in Florida, y company to transact busi | " Certificate of ness in Florida | | | |
| Please return al | ll correspondence concerning this matter to the | following: | | | | | | |
| | Emily Durham, ESQ. | | | | | | | |
| | N | ame of Person | | | - | | | |
| | Berkshire Group | | | · | | | | |
| Firm/Company | | | | | | | | |
| | One Beacon Street, Suite 2400 | | | | | | | |
| | | Address | | | - | | | |
| | Boston, MA 02108 | | | | | | | |
| | City/S | tate and Zip Code | | | | | | |
| sally.liu@berkshire-group.com | | | | | | | | |
| | E-mail address: (to be use | d for future annua | report no | tification) | • | | | |
| For further info | ormation concerning this matter, please call: | | | | | | | |
| | Sally Liu | at (617 |) 556 | 5-8142 | _ | | | |
| | Name of Contact Person | Area Code | Day | rtime Telephone Number | | | | |
| Divisio Regist P.O. B | ING ADDRESS: on of Corporations tration Section Box 6327 tassee, FL 32314 | | Division Registrat Clifton B 2661 Exe | of Corporations ion Section milding ecutive Center Circle see, FL 32301 | | | | |
| | heck for the following amount: 25.00 Filing Fee \$\square\$ \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filit Certified Copy | ng Fee & | ☐ \$160.00 Filing Fee, C of Status & Certified Cop | | | | |

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:

| COMPANIO TRAINGACT BOSINESS I | NIHE SIAIE OF FLORIDA: | | | | |
|---|---|-----------------------------------|---------------------------|-------------------------|-----------------|
| 1. BIR Coral Gables | | | | | |
| (Name of Foreign Limited L | ability Company; must include "Limited | Liability Company," "L.L.C | .," or "LLC.") | | - ' |
| (* P. | | | | | - |
| (If name unavailable, enter alternate name adopted | l for the purpose of transacting business in Florid | a. The alternate name must inclu | de "Limited Liability Con | apany," "L.L.C," or "LL | C.") |
| 2. Delaware (Jurisdiction under the law of which foreign | limited liability company is organized) | 3 | (FEI number, if app | dicable) | - |
| • | | | (r sa manova, m app | indirioj | |
| _{4.} <u>5/31/2017</u> | | | | | |
| (Date (Sec s | first transacted business in Florida, if prior to re- ections 605.0904 & 605.0905, F.S. to determine | istration.) penalty liability) | | | |
| s c/o Berkshire Gro | pup | 6. same as | principal | office | |
| (Street Address of Principal Off | - | · | (Mailing Address) | | - |
| One Beacon Stree | t, Suite 2400 | | | | - |
| Boston, MA 02108 | | | | Z., 2 | _ |
| | | | | | |
| 7. Name and street address of Flor | ida registered agent: (P.O. Box] | NOT acceptable) | | LAH. | COLUMN 1 |
| Como | ration Service Company | - | | - 35 ω | Same and |
| Name: Corpo | nation dervice company | | | SEX | 7 |
| Office Address: 1201 | Hays Street | | | THE SE | delimina, |
| Tallah | assee | , Florida | 32301 | P 24 66 | ¥., |
| | · (City) | , Florida | (Zip code) | | |
| Registered agent's acceptance: | | | | P''' | • |
| Having been named as registered | | | | | |
| designated in this application, I he | | | | | |
| to comply with the provisions of a and accept the obligations <u>of</u> my p | | na complete perjorma | - • | - | zr wun |
| Corpora | ation Service Company | | Meliss | a Zender | |
| By: | | tudo | Asst. Vic | e President | |
| | (Registered agers and | nanie) | | | |
| 8. The name, title or capacity and | | have authority to mana | ge is/are: | | |
| Title or Capacity: | Name and Address: | Title or Capacity: | Nan | ne and Address: | |
| Assistant Secretary | Emily Durham | Secretary | Ма | ry Beth Bl | .oom |
| | same as principle office | | same | as principle | office |
| | | | • | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| (Use attachments if necessary) | | | | | |
| Attached is a certificate of existe | | | | | |
| jurisdiction under the law of which | | is in a foreign language | e, a translation of | the certificate und | ler oath |
| of the translator must be submitted | | | | | |
| | \mathcal{L} | <u>Q</u> | | | |
| | Signature of | an authorized person | | | |
| 10. This document is executed in a | | | I am aware that a | inv false informat | ion |
| submitted in a document to the Dep | | | | | 1011 |
| • | Emily Durham, As | | | | |

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BIR CORAL GABLES II, L.L.C." 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 NINETEENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIR CORAL GABLES"

II, L.L.C." WAS FORMED ON THE SEVENTEENTH DAY OF MAY, A.D. 2017.

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

Authentication: 202571057

Date: 05-19-17