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Office Use Only



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June 6, 2018

APRIL JORDAN 6911 PISTOL RANGE RD SUITE 101B TAMPA, FL 33635

SUBJECT: BC INNOVATION CENTER LLC

Ref. Number: W18000052800

We have received your document for BC INNOVATION CENTER LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

Letter Number: 118A00011770

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: BC Innovation Center LLC

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:

April Jordan
Name of Person
Proluxe Properties
Firm/Company
6911 Pistol Range Road, Suite 101B
Address
Tampa, FL 33635
City/State and Zip Code
beth@proluxeproperties.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

April Jordan

Name of Contact Person

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 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

	me adopted for the purpose of transacting busine			transm's combin	w, "Lat.C, or "Lat.C.)
Delaware	ich füreign hunted hability company is organizet		83-0619897	number, if applica	ble 1
(2021801) (mater tice taw 5) with	ich foreign trance manning company is organized	• •	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(Date first transacted business in Florida, r	Incur to mustribun	.		
	(See sections 605 0904 & 605 0905, F.S.)	o determine penalty l	ability)		
6911 Pistol Range F		6.	6911 Pistol Range R	d, Suite 10	
(Street Address of Principal Office) Tampa, FL 33635			Tampa, FL 33635	Zudic 7 VI	, 6
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		•			20
Name and street address	s of Florida registered agent: (P.C	D. Box NOT a	cceptable)		
	April Jordan		•		恶
Name:	April Jordan				- · · · · · · ·
Office Address:	6911 Pistol Range Rd, Suite	101A	_ _		<u> </u>
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	Tampa		_{Plorida} ろろりろり		
ving been named as regignated in this applications with the provision with the provision.	Tampa (Cay) tance: existered agent and to accept servition. I hereby accept the appoint tons of all statutes relative to the of my position as registered age	ment as registe	for the above stated lim red agent and agree to	act in this co	apacity. I further
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iving been named as register that applicate the provision of accept the obligation. The name, title or capa Title or Capacity:	tance: egistered agent and to accept services, I hereby accept the appoint ons of all statutes relative to the of my position as registered agential the accept services of the person(s) Name and Address:	d agent's signanures who has/have a	(Zi) For the above stated liming the red agent and agree to applete performance of the red agree of the red	ited liability act in this co my duties, ar	apacity. I further
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rying been named as resignated in this applicate comply with the provision of accept the obligation. The name, title or capa Title or Capacity: MGR Jse attachments if necess	tance: gistered agent and to accept servition. Thereby accept the appoints on of all statutes relative to the of my position as registered agent and address of the person(s) Name and Address: Townhome Master Venture 6911 Pistol Range Rd, Sta 101A Tampa, FL 33635 sary) of existence, no more than 90 day of which it is organized. (If the co	d agent's signature) who has/have a	for the above stated liming the agent and agree to applete performance of the agent to manage is/artile or Capacity:	e: Name	apacity. I further and I am familiar was and Address:

Typed or printed name of signee

Ryan Studzinski

Page 1



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

DELAWARE, DO HEREBY CERTIFY "BC INNOVATION CENTER 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 EIGHTEENTH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BC INNOVATION CENTER LLC" WAS FORMED ON THE SEVENTEENTH DAY OF MAY, A.D. 2018.



Authentication: 202906348

Date: 06-18-18