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COVER LETTER
TO: Registration Section Division of Corporations
BCF Services. LLC
SUBJECT: 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:
Timothy Hartley
Name of Person
Hartley Law Offices, PLC
Firm/Company
12 SE 7th Street, Suite 610
Address
Fort Lauderdale, FL 33301
City/State and Zip Code
Hartley@hartleylaw.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Timothy Hartley 954 357-9973at ()
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{align*} \begin{align*} \text{S125.00 Filing Fee} & \Bigsigma \text{S130.00 Filing Fee & Certificate of Status} & \Bigsigma \text{S155.00 Filing Fee & Certified Copy} & \Bigsigma \text{S160.00 Filing Fee, Certified Copy} \end{align*} \$\Begin{align*} \text{S125.00 Filing Fee & Certified Copy} & \Bigsigma \text{S160.00 Filing Fee, Certified Copy} & \Bigsigma \text{S160.00 Filing Fee} & \Bigsigma \text{S160.00 Filing Fee, Certified Copy} & \Bigsigma \text{S160.00 Filing Fee} & \Bigsigma S160.00 Fili

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATIJIEN, THE FOLLOWING IS SUBMITTED TO REGISTER A FORESCY. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BCF Services, LLC			
(Name of Foreign	Limited Liability Company, must include "Limit	ed Liability Compa	any," "L.L.C.," or "LI.C.")
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	orida. The alternate re	ame must include "Limited Liability Company," "L.L.C," or "LLC."
Delaware 2.		3	
(Jurisdiction under the law of wh	nich föreign lumited liability company is organized)	·	(FEI number, if applicable)
01/11/2019 4.			
	(Date first transacted business in Flonda, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration) nine penalty liability)	
636 W. Sierra Madre Blvd. #A.			V. Sierra Madre Blvd. #A.
(Street Address of I	rmenal Office)	0	(Mailing Address)
Sierra Madre, CA 91024		Sierra Madre, CA 91024	
			•
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> accepta	able)
	Timothy Hartley		
Name:			-
00000	12 SE 7th Street, Suite 610		
Office Address:			-
	Fort Lauderdale		33301 , Florida
	(City)		(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)

Title or Capacity:	Name and Address:
	- <u>-</u>
Director	Marcela Vilas Boas da Silva
	636 W. Sierra Madre Blvd. #A.
	Sierra Madre, CA 91024
Director	Maria Carolina Lobo
	636 W. Sierra Madre Blvd. #A,
	Sierra Madre, CA 91024
e attachments if necessary)	
	ence, no more than 90 days old, duly authenticated by the official having custody of records in it is organized. (If the certificate is in a foreign language, a translation of the certificate under
This document is executed in a	accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information partment of State constitutes a third degree felony as provided for in s.817.155, F.S.
×	V to B. M.
	Signature of an authorized person

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF FORMATION OF "BCF SERVICES LLC",
FILED IN THIS OFFICE ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D.
2018, AT 3:59 O'CLOCK P.M.



Authentication: 203955314

Date: 11-26-18

7159667 8100 SR# 20187769131

CERTIFICATE OF FORMATION OF

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:59 PM 11/21/2018
FILED 03:59 PM 11/21/2018
SR 20187769131 - File Number 7159667

BCF SERVICES LLC

- 1. The name of the limited liability company is BCF Services LLC.
- 2. The address of its registered office in the State of Delaware is: Corporation Trust Center, 1209 Orange Street, in the City of Wilmington, Delaware 19801. The name of its registered agent at such address is The Corporation Trust Company.

IN WITNESS WHEREOF, the undersigned have executed this Certificate of Formation of BCF SERVICES LLC this 20TH day of November, 2018.

/s/ Maria Carolina Lobo
Authorized Person

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