

M19000006332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

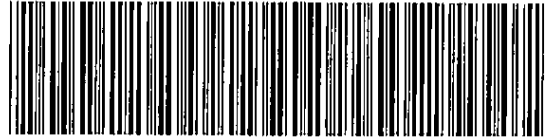
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 28 AM 9:23

19 JUN 28 PM 4:15

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Z BROWN

JUL 01 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 822209 7873747

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : June 26, 2019

ORDER TIME : 3:33 PM

ORDER NO. : 822209-035

CUSTOMER NO: 7873747

FOREIGN FILINGS

NAME: BCSS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

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. BCSS, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

BC SITE SERVICES, 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. Alaska 3. 83-2439726
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 2250 Lovvorn Road 6. 2250 Lovvorn Road
(Street Address of Principal Office) (Mailing Address)

Carrollton, GA 30117 Carrollton, GA 30117

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(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.

By: Roxanne Turner Roxanne Turner
Corporation Service Company Asst. Vice President
(Registered agent's signature)

FILED

2004 JUN 28 PM 6:00
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: Brent Renfrew
☐ Member Address: 2300 Clayton Road
☐ Authorized Suite 1050
Person Concord, CA 94520
☐ Other ☐ Other

☐ Manager Name: Wade Douthit
☐ Member Address: 109 Melrose Park
☐ Authorized
Person Carrollton, GA, 30117
☒ Other President ☐ Other

☒ Manager Name: Ron Cryer
☐ Member Address: 2300 Clayton Road
☐ Authorized Suite 1050
Person Concord, CA 94520
☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: Jeanne DiBella
☐ Member Address: 2300 Clayton Road
☐ Authorized Suite 1050
Person Concord, CA 94520
☒ Other Treasurer ☐ Other

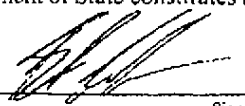
☐ Manager Name: Rachel Feiertag
☐ Member Address: 2300 Clayton Road
☐ Authorized Suite 1050
Person Concord, CA 94520
☒ Other Member Rep ☒ Other Secretary

☐ Manager Name:
☐ Member Address:
☐ Authorized
Person
☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.



Signature of an authorized person

Brent Renfrew

Typed or printed name of signer

Alaska Entity #10093833

State of Alaska
Department of Commerce, Community, and Economic
Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

BCSS, LLC

This entity was formed on October 30, 2018 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate
and affix the Great Seal of the State of Alaska
effective **June 26, 2019**.

A handwritten signature in cursive script, reading "Julie Anderson".

Julie Anderson
Commissioner