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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

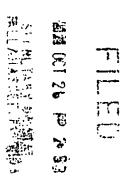
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COVER LETTER

BDP LLC SUBJECT:						
Nar	ne of Limited Liability Company					
The enclosed "Application by Foreign Limited Liability Existence, and check are submitted to register the above	 Company for Authorization to Transact Business in Florida." Certificate e referenced foreign limited liability company to transact business in Flor 					
lease return all correspondence concerning this matter	to the following:					
Robert L. Feldman, Esq.						
	Name of Person					
Law Offices of Robert L. Feldman						
	Firm/Company					
PO Box 387						
	Address					
Tavares, FL 32778						
	City/State and Zip Code					
feldmans48@hotmail.com						
E-mail address: (to)	he used for future annual report notification)					
for further information concerning this matter, please c	rall:					
Robert L. Feldman, Esq.	305 598-4841 at (1					
Name of Contact Person	Area Code Daytime Telephone Number					
Mailing Address: Registration Section	Street Address: Registration Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327	The Centre of Tallahassee					
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE □ \$125.00 Filing Fee □ \$130.00 Filing F						



October 8, 2020

ROBERT L FELDMAN P.O. BOX 387 TAVARES, FL 32778

SUBJECT: BDP LLC

Ref. Number: W20000115563

We have received your document for BDP 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return 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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 220A00019693

RECEIVED
OCT 2 6 2020

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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. BDP LLC	Limited Liability Company; must include "Limited	T	C many "TT " well C	···
BBDP LLC	, , ,			
(If name unavadable, enter alternate i	name adopted for the purpose of transacting business in Flo	orida The	alternate name must include "Limited	Liability Company," "L.L.C," or "LLC ")
Delaware	·		46-2272138	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(EL:1 no	unber, if applicable)
N/A 4.				
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determine	registratio ne penalty	n) : hability)	
c/o Fred Williams, C.P.S. 5. (Street Address of Principal Office)			c/o Robert L. Feldman, E	sq.
(Street Address of Principal Office)			(Mailing Address)	
1326 E. International S	Speedway Blvd., #7		8900 SW 107 Avenue, St	nite 203
DeLand, FL 32724			Miami, FL 33176	第 2 2
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT	acceptable)	87 28 T
Name:	Robert L. Feldman, Esq.			
Office Address:	8900 SW 107 Avenue. Suite 203			
	Miami		33176 , Florida	
	(Cuy)		(Zip code	l

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)

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:	Title or Capacity:	Name and Address:
□Manager	Name: William J. Coe	□Manager	Name: William R. Booth
■Member	Address: 1326 Int'l Speedway Blvd, #7	■Member	Address: 1326 Int'l Speedway Blvd, #7
■Authorized	DeLand, FL 32724	■ Authorized	DeLand, FL 32724
Person		Person	
□Other	Other	Other	Other
□Manager	Name: Patricia A. Thomas	□Manager	Name:
■Member	Address: 1326 Int'l Speedway Blvd, #7	■Member	Address: 1326 Int'l Speedway Blvd, #7
■ Authorized	DeLand, FL 32724	■Authorized	DeLand, F1, 32724
Person		Person	
□Other	Other	□Other	Other
□Manager	Name: Robert L. Feldman, Esq.	□Manager	Name:
□Member	Address: 8900 SW 107 Ave, Ste 203	□Member	Address:
■Authorized	Miami, FL 33176	□Authorized	
Person		Person	
□Other	□Other	□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.

Foliat L. Fellman Signature of an authorized person

Robert L. Feldman, Esq.

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 "BDP 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

TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2020.

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

Authentication: 203700606

Date: 09-21-20