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COVER LETTER

TO:

TO:	Registration Section Division of Corporations					
SUBJE	BPL Properties, LLC					
	N	ame of Limited Liability Company				
The enci	losed "Application by Foreign Limited Liabilice, and check are submitted to register the abo	ity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida.				
Please re	eturn all correspondence concerning this matte	er to the following:				
	Lisa Murphy, Paralegal					
		Name of Person				
	Dykema Gossett PLLC					
		Firm/Company				
	112 E. Pecan Street, Suite 1800					
		Address				
	San Antonio, Texas 78205					
		City/State and Zip Code				
	carol.walker@bplgroup.com					
	E-mail address: (to	be used for future annual report notification)				
For furth	er information concerning this matter, please	call:				
	Lisa Murphy	210 554-5317				
	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 D \$125.00 Filing Fee \$130.00 Filing Certificat	EPARTMENT OF STATE				

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

IN COMPLIANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	BPL Properties, LLC (Name of Foreign	Limited Liability Company; must include "Limite	d Liabilit	y Company, ""L.L.C.," or "LLC.")		
<u>a</u>	marre imagnitable error absences	name adopted for the purpose of transacting business in Fl	T.			
2.	Delaware	which foreign limited liability company is organized)	iorida, The	84-2613998	r, if applicable)	c.")
4.	upon filing					
		(Date first transacted business in Florida, If prior to (See sections 605.0904 & 605.0905, F.S. to determi	registration ine penalty	L) tiability)		
5.	302 East Pettigrew Str	reet	6.	2801 Via Fortuna (Mailing Address)		
,-	Suite C190			Suite 400		
	Durham, North Carolin	na 27701		Austin, TX 78746		
7.	Name and street addres	ss of Florida registered agent: (P.O. Box	NOT :	cceptable)	ZOZD NOV	;-
	Name:	Registered Agent Solutions, Inc.			5 di	
Office Address:	155 Office Plaza Dr., Suite A			AK I		
		Tallahassee		32301 , Florida	- 0s	
		(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.

Mackenzie Hart, Asst. Secretary

(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: Name: Michael Mensa ■ Manager □ Manager Name: Dagger Lane □ Member Address: □Member Address: Elstree, Herts ☐ Authorized ☐ Authorized WD6 3BX, UK Person Person □Other____ □Other Other □Other____ ☐Manager Name: □ Manager □Member Address: ___ ☐ Member Address: ☐ Authorized □ Authorized Person Person Other_ Other Other Other □ Manager Name: Manager Name: _____ □ Member Address: Address: _____ □Member □ Authorized □ 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. Nonindexed 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.

Michael Mensa
Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "BPL PROPERTIES, 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 FOURTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BPL PROPERTIES, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JULY, A.D. 2019.

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

Authentication: 204005840

Date: 11-04-20

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