Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 : (845)425-0077 Phone : (845)818-3588 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

Foreign Limited Liability Company BSLN-FL-1-HIBC Condo LLC

Certificate of Status	U
Certified Copy	U
Page Count	03
Estimated Charge	\$763.75

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

IN COMPLIANCE WITH SECTION 605/002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

nune unavailable, enter alternate r	inne adopted for the purpose of transacting business in E	onda. The alternate name must include "Limited Lo	ability Company," "L.L.C," or "EFC	
Delaware		3.		
Durisdiction under the law of w	high foreign limited liability company is organized)	3(FEI number	er, if applicable)	
12/17/2021				
	(Date first transacted business in Florida, if prior to (Sec sections 605,0904 & 605,0905, F.S. to determ	registration) ine penalty liability)		
7455 Emerald Dunes L	Prive, Suite 800	7455 Emerald Dunes Drive, Suite 800 6. (Masling Address)		
eet Address of Principal Office)				
Ortando, FL 32829		Orlando, FL 32829		
				
Name and street address	ss of Florida revistered agent: (P.O. Box	NOT acceptable)	SEC TALL	
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	SECRE	
Name and street addres	ss of Florida registered agent: (P.O. Box Veorp Services, LLC	<u>NOT</u> acceptable)	SECRETAR TALLAHASS	
Name and street address Name:		<u>NOT</u> acceptable)	31 RPY (RPY (
Name:		NOT acceptable)	31 AM	
	Veorp Services, LLC 1200 South Pine Island Road		31 RPY (RPY (
Name:	Veorp Services, LLC	NOT acceptable) Solution (NOT acceptable) Florida (NOT acceptable)	31 AM	

(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 Capacit	<u>v:</u>	Name and Address:
⊒Manager	Name: BSEN-FL-1 HIBC JV LEC	□Manager	Name:	
□Member	Address:	□Member	Address: _	
□Authorized	Suite 800	☐ Authorized		
Person	Orlando, FL 32829	Person		
	Other	Other		□Other
□Manager	Name:	_ Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		☐ Authorized		
Person		Person		
□Other	□ Other	□Other		□Other
□Manager	Name:	∐Manager	Name:	
□Member	Address:	∃Member	Address: _	
□Authorized		☐ Authorized		
Person		Person		
☐ Other		Other	<u>.</u>	☐ 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	
Brock Nicholas		
	Typed or printed name of signee	

Page: 4 of 4



Page 1

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

DELAWARE, DO HEREBY CERTIFY "BSLN-FL-1 HIBC CONDO 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 THIRTY-FIRST DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BSLN-FL-1 HIBC CONDO LLC" WAS FORMED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2021.

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

at corp. delaware gov/authy

Authentication: 202530726

Date: 01-31-22