



Secretary of State

LLC-5

Application to Register a Foreign Limited Liability Company (LLC)

201814410296

IMPORTANT — Read Instructions before completing this form.

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed. See Instructions.

Filing Fee — \$70.00

Copy Fees — First page \$1.00; each attachment page \$0.50;
Certification Fee — \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov>.

FILED

**Secretary of State
State of California**

MAY 15 2018

This Space For Office Use Only

1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)

BCforward Platinum LLC

1b. California Alternate Name, If Required (See Instructions — Only enter an alternate name if the LLC name in 1a not available in California.)

2. LLC History (See Instructions — Ensure that the formation date and jurisdiction match the attached Certificate of Good Standing.)

a. Date LLC was formed in home jurisdiction (MM/DD/YYYY)

01/11/2018

b. Jurisdiction (State, foreign country or place where this LLC is formed.)

Indiana

c. Authority Statement (Do not alter Authority Statement)

This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2b.

3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

| | | | |
|--|--|--------------------|--------------------------|
| a. Street Address of Principal Executive Office - Do not enter a P.O. Box 9777 N. College Ave. | City (no abbreviations) Indianapolis | State IN | Zip Code 46280 |
| b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box | City (no abbreviations) | State CA | Zip Code |
| c. Mailing Address of Principal Executive Office, if different than Item 3a | City (no abbreviations) | State | Zip Code |

4. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL — Complete Items 4a and 4b only. Must include agent's full name and California street address.

| | | | |
|--|--------------------------------|--------------------|-----------------|
| a. California Agent's First Name (if agent is not a corporation) | Middle Name | Last Name | Suffix |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box | City (no abbreviations) | State CA | Zip Code |

CORPORATION — Complete Item 4c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 4a or 4b

Corporation Service Company Which Will Do Business In California as CSC

5. Read and Sign Below (See Instructions. Title not required.)

I am authorized to sign on behalf of the foreign LLC.

Signature

Type or Print Name

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

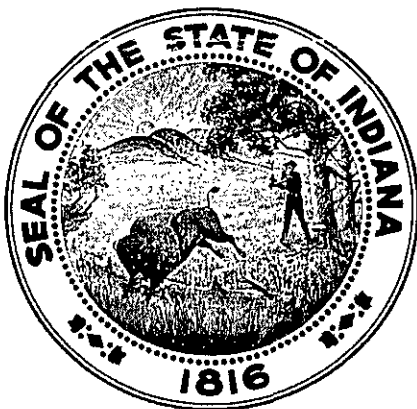
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that _____

BCFORWARD PLATINUM LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on January 11, 2018, and was in existence or authorized to transact business in the State of Indiana on April 11, 2018.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, April 11, 2018

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

201814410296

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All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on May 11, 2018.