Division of Corporations

Florida Department of State Division of Corporation

Electronic Filing Cover Sheet

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(((H16000301868 3)))



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To:

Division of Corporations

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Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023

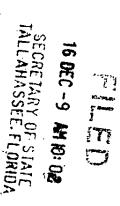
: (614)280-3338 Phone Fax Number : (954)208-0845

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

		_	
T	Address:		
r.mai i	ACCTESS:		

FLORIDA/FOREIGN LP/LLLP SEI RELATED ENTITY, L.P.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$1,052.50



Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

1. SEI Related Entity,	L.P.		
Acceptable Limited Pa	artnership suffixes: Limited Partners	ility Limited Partnership, which must include thip, Limited, L.P., LP, or Ltd. Limited Liability Limited Partnership, L.L.L.P	
If name unavailable,		ership or limited liability limited partnership proda; must contain acceptable suffix.	oposes to register to transact
2 Delaware		12/10/2012	
Sta	te or Country of Formation	Date of Formation	
4. Federal Employer	Identification Number: 90-091803	3	
5. Name of Registere C T Corporation Syst	ed Agent for Service of Process and tem	Florida Street Address:	
1200 South Pine Islan	nd Road		
Plantation, Florida 33	324		
	tive to the proper and complete perform stered agent. CT Corporation S By:	d agree to act in this capacity. I further agree to mance of my duties, and I am familiar with an system System LULU LATUR ure of Registered Agent	
7. Principal Office:		8. Mailing Address:	7
1601 Washington Avenue, #800		1601 Washington Avenue, #800	
Miami Beach, FL 33139		Miami Beach, FL 33139	ARE TAN
-	ship is a limited liability limited prooffice address, and mailing addres	••	9 MID:
Name of General	CEI Investore I D	-	RIG (S
Name of General	1601 Washington Avenue, #800	Name of General Partner:	
Street Address:	Miami Beach, FL 33139	Street Address:	
Mailing Address:		Mailing Address:	
Name of General	Partner:	Name of General Partner:	
Street Address:		Street Address:	
Mailing Address:		Mailing Address:	

Name of General Partner:	Page 1 of 2 Name of General Partner:	
Street Address:	Street Address:	
Mailing Address:	Mailing Address:	
11. Effective date, if other than the date of filing:	ter the date this document is filed by the	Florida Department of State.)
Signs Nick An The individual signing this document affirm that the facts s	20 6 Investors, L.P., its general partnerstarwood Energy Group Global ature of a general partner tonopoulos - Authorized Persentated herein are true and the individual is	records in the jurisdiction under ner, L.L.C, its general partner on s aware that false information
submitted in a document to the Department of State constitution of Filling Fees: Certified Copy (optional): Certificate of Status (optional):	utes a third degree felony as provided fo \$1,000.00 (\$965 Filing Fee and \$35 \$52.50 \$8.75 Page 2 of 2	r in s.817.155, F.S.

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SEI RELATED ENTITY, L.P." 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 EIGHTH DAY OF DECEMBER, A.D. 2016.

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

Authentication: 203470478

Date: 12-08-16