BI700000303

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	

Office Use Only





107 I 073

.



file Second

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

			ACCOL	NT NO	о.	:	1200000	0019	95		
			REF	FEREN	ĊE	:	946776		7768337	,	
			AUTHORI	ZATI	ON	: C	Sould b	7			
			COST	LIM	IT	:	(\$ <u>1000</u> .	00	had a	,	
ססחקס	ጉልጥፍ		December	e 2	017						
OKDEK	DATE	•	December	0, 2	UT /						
ORDER	TIME	:	3:22 PM								

ORDER NO. : 946776-005

ORDER TIME

CUSTOMER NO: 7768337

FOREIGN FILINGS

NAME: SOUTHWEST VALUE PARTNERS FUND XVIII LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:



COVER LETTER

TO: Registration Section Division of Corpor					
SUBJECT: Southwest Val	lue Partners Fund XVIII I	LP			
	of Foreign Limited Partne	ership or Limited	Liability Lim	nited Partnership	_
The enclosed application, co partnership to transact busin Please return all correspond	aess in Florida.		register a fo	breign limited partnersh	ip or limited liability limited
Mark Schlossberg					
	Contact Person		-		
c/o Southwest Value Partne	:18				
<u>. </u>	Firm/Company				
12790 El Camino Real, Sui	ite 150				
	Address		_		
San Diego, CA 92130					
City	, State and Zip Code		_		
E-mail address: (to be use	d for future annual report	t notification)	_		
For further information con	cerning this matter, pleas	e call:			
Mayra Mariscal		_at (480-2900		
Name of Contact I	Person	Area Code a	nd Daytime	Telephone Number	-
Enclosed is a check for the	following amount:				
 \$1,000.00 Filing Fees [(\$965 Filing Fee and \$35 Registered Agent Fee) 	\$1,008.75 Filing Fees and Certificate of Status	s1,052.50 Fil and Certified		\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building		MAILING ADI Registration Sect Division of Corp P. O. Box 6327	tion		

2661 Executive Center Circle Tallahassee, FL 32301

٠

Tallahassee, FL 32314

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

1. Southwest Value Partners Fund XVIII LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware	3.9/15/16
State or Country of Formatio	n Date of Formation
4. Federal Employer Identification Number. 81	
5. Name of Registered Agent for Service of Pro Corporation Service Company	cess and Florida Street Address:
1201 Hays Street	
Tallahassee, FL 32301	
	Igent and agree to act in this capacity. I further agree to comply with the provision ete performance of my duties, and I am familiar with and accept the obligations of Service Company Signature of Registered Agent Signature of Registered Agent
7. Principal Office:	8. Mailing Address:
12790 El Camino Real, Suite 150	12790 El Camino Real, Suite 150
San Diego, CA 92130	San Diego. CA 92130
9. If limited partnership is a limited liability li	
10. Name, principal office address, and mailin SWVP Fund XVIII	
Name of General Partner:	GP LLC Name of General Partner:
Street Address:	Street Address:
San Diego, CA 92130	
Mailing Address: 12790 El Camino Real, Sui	Mailing Address:
San Diego, CA 92130	
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:



Name of General Partner:	Name of General Pariner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days Note: If the date inserted in this block does not meet the document's effective date on the Department of State's re-	after the date this document is filed by the Florida Department of State.) applicable statutory filing requirements, this date will not be listed as the ecords.
Florida Department of State, by the Secretary of State or the law of which it is organized.	ed, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction un 2017
Florida Department of State, by the Secretary of State or	other official having custody of the entity's records in the jurisdiction un
Florida Department of State, by the Secretary of State or the law of which it is organized. Signed this 7th day of December	other official having custody of the entity's records in the jurisdiction un
Florida Department of State, by the Secretary of State or the law of which it is organized. Signed this <u>7th</u> day of <u>December</u> <u>Make</u> Sig The individual signing this document affirms that the fac	other official having custody of the entity's records in the jurisdiction un
Florida Department of State, by the Secretary of State or the law of which it is organized. Signed this <u>7th</u> day of <u>December</u> <u>Make</u> Sig The individual signing this document affirms that the fac	other official having custody of the entity's records in the jurisdiction un
Florida Department of State, by the Secretary of State or the law of which it is organized. Signed this <u>7th</u> day of <u>December</u> <u>Make Signed</u> The individual signing this document affirms that the fac submitted in a document to the Department of State const Filing Fees: Certified Copy (optional):	other official having custody of the entity's records in the jurisdiction un .20 2017 .20 Mark Schlossberg, Authorized Representative gnature of a general partner ets stated herein are true and the individual is aware that false information stitutes a third degree felony as provided for in s.817.155 F.S. \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$255 50
Florida Department of State, by the Secretary of State or the law of which it is organized. Signed this <u>7th</u> day of <u>December</u> <u>Make Signed</u> The individual signing this document affirms that the fac submitted in a document to the Department of State const Filing Fees:	.20 2017 .20 2017 .20 Mark Schlossberg. Authorized Representative gnature of a general partner ets stated herein are true and the individual is aware that false information stitutes a third degree felony as provided for in s.817.155; F.S. \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) ~~

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTHWEST VALUE PARTNERS FUND XVIII LP" 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 SIXTH DAY OF DECEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTHWEST VALUE PARTNERS FUND XVIII LP" WAS FORMED ON THE FIFTEENTH DAY OF SEPTEMBER, A.D. 2016.

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



Jeffrey W. Bu

Authentication: 203701587 Date: 12-06-17

6152780 8300 SR# 20177425785

You may verify this certificate online at corp.delaware.gov/authver.shtml

Page 1