## B19000000199

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
File 2nd

Office Use Only



100332179431

FILE 5: 30



K. SALY JUL 22 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Filone: 830-338-1300

ACCOUNT NO. : I2000000195

REFERENCE : 851820 4804708

AUTHORIZATION : TRUBBLE MAN

COST LIMIT : \$ 1000.00

ORDER DATE : July 18, 2019

ORDER TIME: 8:51 AM

ORDER NO. : 851820-015

CUSTOMER NO: 4804708

\_\_\_\_\_

## FOREIGN FILINGS

NAME: ENDOWMENT TOTAL CORE HEDGED

AND ABSOLUTE FUND, L.P.

XXXX QUALIFICATION (TYPE: <u>LP</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62969

EXAMINER:

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Endowment Total Core Hedged	and Absolute Fund, L.P.
	d Partnership or Limited Liability Limited Partnership
The enclosed application, certificate of status partnership to transact business in Florida. Please return all correspondence concerning to	and fees are submitted to register a foreign limited partnership or limited liability limited his matter to:
Jack Galardi	
Contact Person	<del></del>
Seward & Kissel LLP	
Firm/Company	
One Battery Park Plaza	
Address	
New York, NY 10004	
City, State and Zip Co	de
galardi@sewkis.com	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matte	r, please call:
Jack Galardi	at ( 212 ) 574-1619
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount	: :
S1,000.00 Filing Fees S1,008.75 Filing (\$965 Filing Fee and \$35 Registered Agent Fee) S1,008.75 Filing S1,00	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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

19 JUL 19 PH 5:

1. Endowment Total Core Hedged and Absolute Fund, L.P. (Name of Limited Partnership or Limited Liability Limited Partnership, which must include stiffix) 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 State or Country of Formation **Date of Formation** 4. Federal Employer Identification Number \_\_\_\_\_ 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 6. Thereby 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.

Corporation Service Company

Roxanne Turner

By:

Asst. Vice President Asst. Vice President Signature of Registered Agent 7. Principal Office: 8. Mailing Address: c/o Endowment Total Core Fund GP, LLC c/o Endowment Total Core Fund GP, LLC 1395 Brickell Ave, Suite #100 1395 Brickell Ave, Suite #100 Miami, FL 33131 Miami, FL 33131 9. If limited partnership is a limited liability limited partnership, check box. 10. Name, principal office address, and mailing address of each general partner: Name of General Partner: Endowment Total Core Fund GP, LLC Name of General Partner: 1395 Brickell Ave, Suite #100 Street Address: Street Address: Miami, FL 33131 1395 Brickell Ave, Suite #100 Mailing Address: Mailing Address: Miami, FL 33131 Name of General Partner:\_\_\_\_\_\_\_ Name of General Partner:\_\_\_\_\_\_ Street Address: \_\_\_\_\_\_ Street Address: \_\_\_\_\_ Mailing Address: Mailing Address:

Name of General Partner:\_\_\_\_\_\_ Name of General Partner:\_\_\_\_\_ Street Address: Street Address: Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_ 11. Effective date, if other than the date of filing: Upon filing (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized. Signed this 18 day of July .20 19 J. Matchyll 74 eu USignature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52,50

Certificate of Status (optional):

\$8,75



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

DELAWARE, DO HEREBY CERTIFY "ENDOWMENT TOTAL CORE HEDGED AND

ABSOLUTE FUND, 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 EIGHTEENTH DAY OF

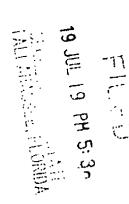
JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENDOWMENT TOTAL

CORE HEDGED AND ABSOLUTE FUND, L.P." WAS FORMED ON THE SIXTH DAY OF

JUNE, A.D. 2019.

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





Authentication: 203245173

Date: 07-18-19