| (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: | | | | |
| | | | | |
| | | | | |
| W2000048573 | | | | |

Office Use Only



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05/08/20--01014--027 **1061.25

THE ED

45/2/20



May 18, 2020

STEPHANIE SEYBERT 8825 BUD JENSEN DRIVE NORTH RICHLAND HILLS, TX 76180

SUBJECT: SCW DIVERSIFIED, L.P.

Ref. Number: W20000048573

We have received your document for SCW DIVERSIFIED, L.P. and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 120A00010022

RECEIVED
JUN 1 0 2020

COVER LETTER

| | COVEREETER | | |
|---|---|---|----------------|
| TO: Registration Section Division of Corporations | | | |
| SUBJECT: SCW Diversified LP | | | |
| Name of Foreign Limited Partne | rship or Limited Liability | Limited Partnership | _ |
| The enclosed application, certificate of status and fees partnership to transact business in Florida. Please return all correspondence concerning this matter | | a foreign limited partnershi | |
| Stephanie Seybert | | | FILED PM 3: 05 |
| Contact Person | | | |
| SCW Diversified LP | | | 5 7 |
| Firm/Company | | | Series P. ITI |
| 8825 Bud Jensen Drive | | | To w |
| Address | | | og og |
| North Richland Hills, TX 76180 | | | On O |
| City, State and Zip Code | <u> </u> | | |
| SSeybert@seytec.com | | | |
| E-mail address: (to be used for future annual report | notification) | | |
| For further information concerning this matter, please | call: | | |
| Stephanie Seybert | at (817-595-1949) | | |
| Name of Contact Person | | ne Telephone Number | _ |
| Enclosed is a check for the following amount: | | | |
| □\$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee) □\$1,008.75 Filing Fees and Certificate of Status | □\$1,052.50 Filing Fees and Certified Copy | ■\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status | |
| Mailing Address: | Street A | ddress: | |

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

| SCW Diversified, L | | | | | |
|---|--|--|---|--|--|
| A and abla I imited De | nited Partnership or Limited Liabili artnership suffixes: Limited Partnershi ability Limited Partnership suffixes: L | in, Limited, L.P., LP, or | Lla. | | |
| If name unavailable, | name under which the limited partners business in Florida | ship or limited liability l | limited partnership proposes to register to transactule suffix. | | |
| Texas | | 3. 10/01/2000 | | | |
| <u>-</u> . | te or Country of Formation | | Date of Formation | | |
| 4. Federal Employer | Identification Number: 75-2909783 | | | | |
| | d Agent for Service of Process and F | Florida Street Address: | 7020 JUN 10 | | |
| Stephanie Seybert | | | | | |
| 500 Odyssey Way | | | 5 7 | | |
| Merritt Island, FL 329 | 953 | | | | |
| 6. I hereby accept the of all statutes relaming my position as regi | tive to the proper and complete perform stered agent. | agree to act in this cape mance of my duties, and re of Registered Agent | acity. I further agree to comply with the provisions I am familiar with and accept the obligations of | | |
| 7. Principal Office: | | 8. Mailing Address | : | | |
| 7. Timeipai Office. | | SCW Diversified, L | - | | |
| 8825 Bud Jensen Dri | 2005 | | 5 Bud Jensen Drive | | |
| North Richland Hills | | | th Richland Hills, TX 76180 | | |
| | rship is a limited liability limited par l office address, and mailing address | | | | |
| | | | neral Partner: | | |
| | | | ss: | | |
| Street Address: | North Richland Hills, TX 76180 | Sueet Addic | | | |
| | 8825 Bud Jensen Drive Mailing Ad | | | | |
| Mailina Addrecs | | [A][M][H][E, 7.1010 | n v35 | | |
| Mailing Address | North Richland Hills, TX 76180 | Waining Floo | | | |
| , , | North Richland Hills, TX 76180 | | | | |
| Name of Genera | North Richland Hills, TX 76180 Partner: | Name of Ge | | | |

Page 1 of 2

| Name of General I | Partner:N | ame of General Partner: | | | |
|--|---|---|--|--|--|
| Street Address: _ | S | treet Address: | | | |
| Mailing Address: | | failing Address: | | | |
| Note: If the date inser locument's effective of 2. Attached is a certification Department of the law of which it is | ficate of existence duly authenticated, not more to f State, by the Secretary of State or other official organized. | han 90 days prior to the delivery of this application to the having custody of the entity's records in the jurisdiction under | | | |
| Signed this | day of April | | | | |
| Signature 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

Page 2 of 2



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate Of Limited Partnership for SCW DIVERSIFIED LP (file number 14123510), a Domestic Limited Partnership (LP), was filed in this office on October 19, 2000.

It is further certified that the entity status in Texas is in existence.



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 24, 2020.



Ruth R. Hughs Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 978618330005

Phone: (512) 463-5555 Prepared by: SOS-WEB