9/20/23, 9:22 AM

Division of Corporations

## Band Plorida Department of State Division of Comporations Electronic Fifting Cover Show

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

Email Address: | | perkins@scebrokerage.com

## FLORIDA/FOREIGN LP/LLLP

Snapper Creek Energy I, LP

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

Electronic Filing Menu

Corporate Filing Menu

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Τo

12122023573

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

Snapper Creek Energy I, LP	
(Name of Limited Partnership or Limited Liabil Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: I	ity Limited Partnership, which must include suffix) ip, Limited, J. P., J.P., or Ud. amited Liability Limited Partnership, L.L.P., or U.L.P.
	ship or limited liability limited partnership proposes to register to transact it must contain acceptable suffix
Delaware	3, 08.09/2022
State or Country of Formation	Date of Formation
Federal Employer Identification Number 88-3749813	
<ol> <li>Name of Registered Agent for Service of Process and F C T Corporation System</li> </ol>	florida Street Address:
1200 South Pine Island Road	
Plantation, Florida 33324	
of all statutes relative to the proper and complete perform my position as registered agent.  By:  C T Cor	ugree to act in this capacity. I further agree to comply with the provision nance of my duties, and I am familiar with and accept the obligations of reporation System.  Kaity Toon, Assistant Sector Registered Agent
Principal Office:	8. Mailing Address:
26o5 South Bayshore Drive	2665 South Bayshore Drive
Suite 1020	2665 South Bayshore Drive Suite 1020
Miami FL 33133	Mrami FL 33133 22 0
. If limited partnership is a limited liability limited part	
0. Name, principal office address, and mailing address	of each general partner:
Name of General Partner: Snapper Creek Energy S, 1.1.C	Name of General Partner:
2665 South Bayshore Drive	Street Address:
Miami, Ft. 33133	
Mailing Address: 2665 South Bayshore Drive (Suite 102	
Miami, FL 33133	
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
****	

Name of Ge	neral Partner:	Name of General Partner:	
Street Addre	255:	Street Address:	
Mailing Add	dress:	Mailing Address:	
(Effective date c Note: If the date document's effe 12. Attached is a	annot be prior to nor more than 90 days inserted in this block does not meet the citive date on the Department of State's reactive date of existence duly authenticate that of State, by the Secretary of State or	after the date this document is filed by the Florida Department of applicable statutory filing requirements, this date will not be liste cords.  Ed, not more than 90 days prior to the delivery of this application other official having custody of the entity's records in the jurisdice.	to the
Signed this 14	day of September	,20 23	
	igning this document affirms that the fact	Isaac Perkins  nature of a general partner  s stated herein are true and the individual is aware that false info- itutes a third degree felony as provided for in s.817.155, F.S.	rmation
	Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "SNAPPER CREEK ENERGY I, 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 NINETEENTH DAY OF SEPTEMBER, A.D. 2023.

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

at corp. delaware. gov/auti

Authentication: 204199074

Date: 09 19 23