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LAW OFFICES OF

OSHINS & ASSOCIATES, LLC

1645 VILLAGE CENTER CIRCLE, SUITE 170 LAS VEGAS, NEVADA 89134 (702) 341-6000 Fax (702) 341-6001 WWW.OSHINS.COM

July 7, 2015

Florida Department of State Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

Re: SCW Properties, LLC

Dear Sir/Madam:

Enclosed for filing is a Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, along with a Certificate of Good Standing for the above referenced entity. Also enclosed is a check in the amount of \$160.00 for the cost of filing and associated fees.

Please send the filed document back to me in the enclosed self-addressed, self-stamped envelope.

Should you have any questions or concerns regarding this matter, please do not he sitate to contact me.

Sincerely,

Cristine Parrino, Paralegal

On Behalf Kristen E. Simmons, Esq.

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enp Enclosures

COVER LETTER

TO:	Registration S Division of Co							
SUBJI	SCW Prop	verties, LLC			-			
		Name of	Limited Liability	Company				
The en Exister	closed "Applicati ice, and check are	on by Foreign Limited Liability Comes submitted to register the above reference.	pany for Authoriza enced foreign limi	ation to Transact Businted liability company	ness in Florida," Certificate of to transact business in Florida			
Please	return all corresp	ondence concerning this matter to the	following:					
	Kriste	en E. Simmons, Esq.						
	 -	7	ame of Person					
	Oshir	s & Associates, LLC						
		Firm/Company						
	1645	Village Center Circle, Suite 170			7A SE 5			
		Address						
	Las V	egas, NV 89134			多 第二三			
		City/S	State and Zip Code					
					FLOND #			
		E-mail address: (to be use	d for future annual	report notification)	2 n 5			
For fur	her information of	oncerning this matter, please call:						
	Kristen E. Sim	mons, Esq.	702 at (341-6000 				
		Name of Contact Person	Area Code	Daytime Telepi	hone Number			
	MAILING AD Division of Cor Registration Se P.O. Box 6327 Tallahassee, FL	porations ction	•	STREET ADDRES Division of Corporat Registration Section Clifton Building 2661 Executive Cent Tallahassee, FL 3236	tions ter Circle			
Enclose	d is a check for t	ne following amount: ng Fee	☐ \$155,00 Filir Certified Copy		00 Filing Fee, Certificate & Certified Copy			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Name of Fo	!				
(1.1812 0110	reign Limited Liability	y Company; must inclu	ide "Limited Lial	oility Company," "L.L.C	.," or "LLC.")
/16		10 1		. <u> </u>	
Liability Company," "L.L.C	uternate name adopted "," or "LLC.")	a tor the purpose of tra	insacting busines	s in Florida. The alternat	e name must include "Limited
2. Nevada		3			
(Jurisdiction under the lav company is organized)	v of which foreign lim	ited liability		(FEI number, if applied	cable)
4	(Date first tr	ansacted business in F	lorida if prior to	registration)	
•	(See sections 6	05.0904 & 605.0905,	F.S. to determine	penalty liability)	
5					
138	43 159H	h Street	North		5 5
1	(Str	eet Address of Princip			一語用量可
s. <u>Jup</u>	nter Flo	oricla 331	178		_ 荡霜一一
'	(能一面
		(Mailing Addres	s)		— 温 里 口
7. Name and <u>street addre</u>	er of Florida registe		•	hla)	निर्दे 🖛
. Maine and <u>street adule</u>	(a)		x <u>NO1</u> accepts	iole)	हिस ह
Name:		W DID	<u> </u>		
Office Address:	1200	Wi EGELG	1741m2	At 500	
	Poca	Radon	<i></i>	, Florida <u>5343</u>	2
		(City)		(Zip code	
Registered agent's accep	atance:	•		ahous stated someons	ation at the place decignated i
	·	to accept service of			
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA



IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include Liability Company," "L.L.C," or "LLC.")	clude "Limited
Nevada	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
company is organized)	
•	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
	#
13843 159th Street North	*
(Street Address of Principal Office)	र्स
Jupiter Florida 33478	
(Mailing Address)	
Name and street address of Florida registered agent: (P.Q. Box NOT acceptable)	T T
realine and street address of Fiorida registered agent. (F.O Box NOT acceptable)	
Name: Darry D. Dies.	
Office Address: 1200 N. Federal Huy Ste 200	7)
Boca Ration, Florida 33432	
(City) (Zip code)	
egistered agent's acceptance:	
laving been named as registered agent and to accept service of process for the above stated corporation at the pla his application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further ag	ice designated in
ith the provisions of all statutes relative to the proper and complete performance of my duties, and <u>I</u> am familiar	
e obligations of my position as registered agent.	•
(Registered agent's signature)	
. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
ietske Cath Wood, Manager	
ietske Cath Wood, Manager 13843 159th Street North	
ietske Cath Wood, Manager 13843 159th Street North	
ietske Cath Wood, Manager 13843 159th Street North Jupiter Florida 33478	
ietske Cath Wood, Manager 13843 159th Street North Jupiter Florida 33478 Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of	
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody or risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate	
ietske Cath Wood, Manager 13843 159th Street North Jupiter Florida 33478 Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody or risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate is in a foreign language, a translation of the certificate.)	
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ietske Cath Wood, Manager 13843 159th Street North Jupiter Florida 33478 Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of	
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody or risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate translator must be submitted) Signature of an authorized person a accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalty	icate under oath
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of disdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate translator must be submitted) Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalter facts stated herein are true. I am aware that any false information submitted in a document to the Department of St	icate under oath
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody or risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate translator must be submitted) Signature of an authorized person	icate under oath

Typed or printed name of signee





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, SCW PROPERTIES, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 2, 2015, and is in good standing in this state.

A TAND

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 6, 2015.

Barbara K. Cegavske

BARBARA K. CEGAVSKE

Secretary of State

Electronic Certificate
Certificate Number: C20150706-1678
You may verify this electronic certificate
online at http://www.nysos.gov/