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Foreign Limited Liability Company STARWOOD ENERGY MANAGEMENT, L.L.C.

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Help

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

IN COMPLIANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BLISINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")	, Starwood Energy Mana	gement I.I.C.					
Liability Company, "FLL.C." or "LLC.") Delaware [Gunstication under the law of which foreign limited liability company is arganized.) (Date first transacted business in Florida, if prior to registration.) (See sections 695.9964 & 695.9905, F.S. to determine penalty liability) [General Address of Frincipal Office) Miami Beach, FL 33139 (Mailing Address) 7. Name and agreed address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: CT Corporation System City City			sclude "Limited Liability Co	mpany,""L.L.C.," or "L	LC.")	-	
2. Deleware (Gursiciation under the law of which foreign limited liability company is organized) 4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 1601 Washington Avenue, #800 Mismi Beach, FL 33139 (Mailing Address) 7. Name and sireot address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System Office Address: 1200 South Fine Island Road Plantation (City) (Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to ach in this capacity. I further agree to complywith 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 and agree to ach in this capacity. I further agree to complywith 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 agent's acceptance: (Registered agent's acceptance: (Registered agent's acceptance) (Registered agent as algority to manage is/arc: Managing Member. SEI Management-II, L.P. 1601 Washington Avenue, #800 Mismi Beach, FL 33139 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document to the Department of State constitutes a third degree felony as provided for in a.817.155, F.S.	(If name unavailable, enter alt Liability Company," "LL.C."	ernate name adopted for the purpose of or "LLC.")	ftransacting business in Flor	ida. The alternate name	must include "Li	_ mited	
Company is organized		•	, 20-5953711				
Cite intertanged beings in Florida, if prior to registration.]	Jurisdiction under the law	of which foreign limited liability	J(FEI	number, if applicable)		_	
Size and street address of Florida registered agent: (P.O. Box NOT acceptable) Size and street address of Florida registered agent: (P.O. Box NOT acceptable) Size and street address of Florida registered agent: (P.O. Box NOT acceptable) Size and street address of Florida registered agent: (P.O. Box NOT acceptable) Size and street address of Florida registered agent: (P.O. Box NOT acceptable) Size and street address of Florida registered agent: (P.O. Box NOT acceptable) Size and street agent and street address: Size and street agent and agree to act in this capacity. I further agree to complyeth 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. C T Corporation System	4			· · · · · · · · · · · · · · · · · · ·			
Miami Beach, FL 33139 (Street Address of Frincipal Office) Mismi Beach, FL 33139 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: CT Corporation System 1200 South Pine Island Road 1200 South		(See sections 605.0904 & 605.09	in Florida, if prior to registra 05, F.S. to determine penalty	tion.) · liability)			
(Street Address of Frincipal Office) Mismi Beach, FL 33139 (Maiting Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System Office Address: 1200 South Pine Island Road Plantation Florida Florida Florida Florida Florida This application, I hereby accept the application accept and agree to act in this capacity. I further agree to complywith 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. By: (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/nave authority to manage is/are: Managing Members SEI Management-II, L.P. 1601 Washington Avenue, #800 Mismi Beach, FL 33139 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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. Madison Grose	5. 1601 Washington Aver	nue, #800					
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Office Address: 1200 South Pine Island Road City (Zip code)	7. Name and street address	s of Florida registered agent: (P.O.	Box NOT acceptable)		SS		Strankin Production
Office Address: Plantation Florida 33324	Name:	C T Corporation System			E O	≥=	5
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Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "STARWOOD ENERGY MANAGEMENT, L.L.C." 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 EIGHTH DAY OF DECEMBER, A.D. 2016.

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

Authentication: 203470608

Date: 12-08-16

4233577 8300 SR# 20166968796