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PICK-UP	☐ WAIT	MAJL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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Office Use Only



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SECRETARY OF STATE FALLAHASSEE, FLORING

APPROVED AND FILED

Khia

#### **COVER LETTER**

	ion Section of Corporations	<b>4</b> 57 }				<b>:</b>		` <b>.</b>
SUBJECT:	SEF	3 WATCH	Roya	Jy	PARTNO	=RS	LLC	
		,	Name of Limit	ed Liability	Company			
The enclosed "App	ligation by Form	ian Limitad Liabi	litu Company	Fam Authonia	ation to Transac	u Ducinaci	in Elopido " C	Tartificate of
Please return all co	rrespondence co	oncerning this mat	ter to the follo	wing:				
_		=			Sworth			
			Name o	of Person				
			SEAWA	afch i	Royalts	Poset	Kens, L	1
_	vision of Corporations							
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			Ind	sa La.	ific,	FL.	32903	
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			CJ	ELLS	6 mm	N. C	m	
		E-mail address: (	to be used for	future annua	il report notifica	ition)		
For further informa	tion concerning	this matter, pleas	e call:					
	CKE	T FZLSW	oRIL at	321	) 952	2-20	34	
	Name of	Contact Person		Area Code	e Daytime	: Telephon	e Number	
							IS	
Tallahasse	e, FL 32314				2661 Executi	ve Center	Circle	
Enclosed is a check	for the following	ng amount:						
_		□ \$130.00 Fil	-		•			

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

, 1	, and the second	
	ION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABIL	ЛΥ
	INESS IN THE STATE OF FLORIDA:	
1. SEGURTO	imited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(Name of Foreign L	imited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate nar	ne adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC,")	
	, , , , , , , , , , , , , , , , , , , ,	
2. W	10 th foreign limited liability company is organized)  3. 2720 47 40 )  (FEI number, if applicable)	
(Jurisdiction under the law of whi	th foreign limited hability company is organized) (FEI number, if applicable)	
4. Upon A	(Date first transacted business in Florida, if prior to registration) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
— <del>—  </del>	(Date first transacted business in Florida, it prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
	at a	
5. 989 N. L. (Street Address of Pri	hwy AIA are 6. P. O. Box 33907  (Mailing Address)	
(Street Address of Pri	ncipal Office) (Mailing Address)	
T 0 1	ntic, FL 32903 IndiaLantic, FL 32903	
LNC)ALA	A MOJALANTO 32703	
7. Name and street address	of Florida registered agent: (P.O. Box NOT acceptable)	
	CL-T FUSGIAPTL	
	989 N. HWY AIR 42	
Name:	ARY N. HWY AIR	
Office Address:	<u> </u>	
	/ /-	
	India Laxtic Florida 32903 (City) (Zip code)	
	(City) (Zip code)	
Registered agent's accepta		
	ince. istered agent and to accept service of process for the above stated limited liability company at the place	ę
designated in this applicati	on, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agi	ree
	ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with	Į.
ana accept the obligations	of my position as registered agent.	
	C) 700mxt F9 5	
-	(Registered agent's signature)	
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MEMBER-MANAGER	CLET ELLSWORTH	
	789 N. HWY AIA #2	_
	Tradio Londic, FL 32903	_
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	7. S 20	_
_	GRET LLAII	- AP
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ttachments if necessary)		
ched is a certificate of existence, no more ction under the law of which it is organiz ranslator must be submitted)	e than 90 days old, duly authenticated by the official having custody ed. (If the certificate is in a foreign language, a translation of the cert	of records i ificate unde
	ith section 605.0203 (1) (b). Florida Statutes. I am aware that any fals tate constitutes a third degree felony as provided for in s.817.155, F.S.	
	C 1 300 B	
	Chron	

## STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

### SEAWATCH ROYALTY PARTNERS LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **March 26, 2007**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2007-000535619**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 23rd day of December, 2018 at 2:12 PM. This certificate is assigned 029169939.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.