State



Secretary of State

Application to Register a Foreign Limited Liability Company (LLC)

LLC-5

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the

For Office Use Only

-FILED-

File No.: 202464214491 Date Filed: 10/10/2024

California Franchise Tax Board each year. For more information, go https://www.ftb.ca.gov/.	o to	This Space	For Office U	Jse Onl	٧
1a. LLC Name (Enter the exact name of the LLC as listed on your attach	ed Certificate of Go	ood Standing.)			-
SCE DevCo	Services, LLC				
1b. California Alternate Name, If Required (Only enter an altern	ate name if the LLC	C name in 1a not available	in Califomia.))	
LLC Jurisdiction (Ensure that the jurisdiction matches the attached	1 Certificate of Goo	d Standing)			
a. Jurisdiction (State, foreign country or place where this LLC is formed.)	2 001 111100110 01 000	a otaniang./			
	ıware				
b. Authority Statement (Do not alter Authority Statement) This LLC currently has powers and privileges to conduct busi	nece in the etat	e foreign country or	nlaco enter	ad in Ita	m 2a
<u> </u>					
3. Business Addresses (Enter the complete business addresses. If	* 		are of an indi		
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbrevi	City (no abbreviations)		Zip Code	
470 Atlantic Avenue, Suite 601		Boston		02210	
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box City (no abbreviations)		State	Zip Code		
			CA		
c. If the Mailing Address is the same as item 3a or 3b, check the applicable box	3a3b				
d. Mailing Address - if different than item 3a or 3b	City (no abbrevi	City (no abbreviations)		Zip Code	
c/o Swift Current Energy 470 Atlantic Avenue, Suite 601	Boston	Boston		02210	
4. Service of Process (Must provide either Individual OR Corporation	n.)				
INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's fu	I name and Califor	nia street address.			
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbrevi	City (no abbreviations)		Zip Co	de de
CORPORATION – Complete Item 4c only. Only include the name of the	registered agent (Corporation.		.L	
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do n	ot complete Item 4a	or 4b			
Cogency	Global Inc.				
5. Read and Sign Below (Title not required.)					
By signing, I affirm under penalty of perjury that the informatio	n herein is true	and correct and that	I am author	rized to	sign
on behalf of the foreign LLC.					-
William H. Harringes -		William Ha	avemeyer		
Signature	Type an	and Print Name			

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

DELAWARE, DO HEREBY CERTIFY "SCE DEVCO SERVICES, LLC" 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 TENTH DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SCE DEVCO SERVICES, LLC" WAS FORMED ON THE THIRD DAY OF OCTOBER, A.D. 2024.

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

5384470 8300

Authentication: 204603178

Date: 10-10-24