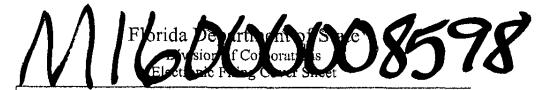
Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Rosa Wong, Paralegal

Account Name : AKERMAN LLP - MIAMI

Account Number: 075471001363 Phone

: (305)374-5600 Fax Number : (305) 374-5095

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: gspeer@kitsonpartners.com

Foreign Limited Liability Company S W FL1B, LLC

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10/27/2016

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY

(If name unavailable, enter al Liability Company," "L.L.C."		ransacting business in Florida. The alternate name mus	t include "Limited
2. Delaware	3	3. 41-2243043	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4			
	(Date first transacted business in (See sections 605.0904 & 605.0905	Florida, if prior to registration.) , F.S. to determine penalty liability)	
4500 PGA Boulevard,	Sulte 400		. n
Palm Beach Gardens, F	Norldo 22410		16 OCT
rain beach Galuens, r	(Street Address of Princ	Cost Office)	OCT STOR
4500 PGA Boulevard,	•	ipai Office)	
Palm Beach Gardens, I	Florida 33418		ST. TOP
	(Mailing Addr	ess)	当生
. Name and street addres	s of Florida registered agent: (P.O. E	Box NOT acceptable)	
Name:	George G. Speer		AH IO: 53
Office Address:	4500 PGA Boulevard, Suite 400		<i>₹</i>
	Palm Beach Gardens	Florida 33418	

Registered agent's acceptance:

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

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 act in this capacity. I further agree to complywith the provisions of all stately 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.

(Zip code)

	(Registered agent's signature)	
The name, title or car	pacity and address of the person(s) who has/have authority to manage	uis/are:
	LLC, Member - 4500 PGA Boulevard, Sulte 400, Palm Beach Garde	

(City)

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 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.

Sydney W. Kitson, as authorized person

Typed or printed name of signee

Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "S W FL1B, 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 TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "S W FLIB, LLC"

WAS FORMED ON THE EIGHTEENTH DAY OF JUNE, A.D. 2007.

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

4372886 8300
SR# 20166384201
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203234831

Date: 10-27-16