N/12000000342

	Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

8d0-927-9800 3d2-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: January 26, 2018

Order#: 041447-025

Re: SW7 PARTNERS GP LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Marissa Rather-lopez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	Name of the limited liability company: SW7 PARTNER	S GP LLC		
2. (a	1111 Lincoln Road		1111 Lincoln Road Mailing address of limited liability company:	
- (-)	Principal office address of limited liability company:			
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST	<u>OFFICE BOX</u>)
	Suite 802		Suite 802	
	Miami Beach, FL 33139		Miami Beach, FL	33139
	01/19/2012	. <u> </u>	M12000000342	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a) Gross, William J.			
	Registered Agent and Registered Office shown on the records of the	he Florida I	ept. of State:	
	150 West Flagler St.			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	<u> </u>	
	Suite 2200			
	Miami , FL	33130	<u>=1</u>	20
(b	Corporation Service Company		(F)	TIL
(,	Enter name of NEW Registered Agent and/or NEW Registered C	<u> </u>	JAH 30	
			(2)	0 171
	1201 Hays Street			
	NEW Registered Office Address:		L. Cyright	Φ ω
			ر ر	
	Tallahassee FL_	32301		
the ch agent was/v	limited liability company is not organized under the law lange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial tere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the I	the registe bility com `the limit	red office and the business offi pany, it is hereby confirmed the ed liability company or as other	ce of the registered at the change(s)
/s/ Jill Cilmi Jill Ciln			Imi, Authorized Person	
Sign	ature of a member or authorized representative of a member		Printed or typed name of	signee
provi: the of to me	chy accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I have a first change of this change.	performan Før in Ch	ige of my duties, and Lam famil Japter 605, F.S. Or, if this docu	iar with and accept ment is being filed
Signat	ure of Registered Agent Corporation Service Company	BY: Gra	de E. Kirby, Asst. Vice Presi	dent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00