12/2/201 000753

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000263568 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (050)222-1092

Phone

Fax Number

: (850)878-5368

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

tal Address:

Foreign Limited Liability Company SWAY MANAGEMENT LLC

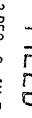
Certificate of Status	0
Certified Copy	0
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Electronic Filing Menu

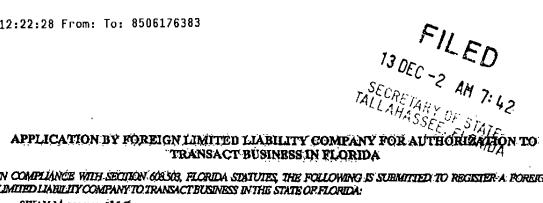
Corporate Filing Menu

Help

DEC - 3 2013



CR2B017 (9/10)	COV	er letter		
TO: Registration Section Division of Corporation	5			
SUBJECT: SWAY Manageme	nt LLC			•
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed "Application by Po Bristence, and check are submitt				
Please return all correspondence	_	•		
, B.	tru Schmidt			
<u></u>	No No	ime of Person	<u> </u>	•
5	tsy Schmidt Na dley Austin Fi	<u>.</u> .		
	Fir	m/Company	· · · · · · · · · · · · · · · · · · ·	=
One		orn St.		
		Address		•
Ch	icaso. IL	40403		•
	City/St	(40403 ate and Zip Code		•
bsc	hmidt@sidley	for future annual report noti		_
	E-mail address: (to be used	for future annual report noti	fication)	_
For further information concernic	g this matter, please call:			,
		at (
Namo	of Person Area	at () Code & Daytime Telephone	Number	-
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tellahassee, FL 32314	Division Registre Clifton 2661 B	TADDRESS: n of Corporations ation Section Building secutive Center Circle ssee, FL 32301	· · ,	
Buclosed is a check for the			—	
□ \$125,00 Filing Fee	☐ \$130,00 Piling Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	Il \$160.00 Filing Fee, of Status & Certific	



IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	, THE FOLLOWING IS SUBMITTED TO REGISTER A PORTION STATE OF ELOPIOA
1 SWAY Management LLC	,
(Name of Foreign Limited Liability Company; must include	"Limited Liability Company,"" LL.C.," or "LLC.")
(If name unavailable, onter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C." "LLC.")	of transacting business in Florida and attach a copy of the written ate name. The alternate name must include "Limited Liability
2. Delaware .	3240422892
(Jurisdiction under the law of which foreign limited liability company is organized)	(PBI humber, if applicable)
4. June 7; 2013	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, il prior to registration.)
(See sections 608.501 & 608.502 F.S. to 7 591 Wost Pulnam Avenue	o determine penalty liability)
Greenwich, Connecticut: 05830	
(Street Address of	Principal Office)
8. If limited Hability company is a manager-managed co	ompany, check here 🗌
9. The name and usual business addresses of the manage	ging members or managers are as follows:
Starwood Capital Group Global, L.P.	
591 West Pumem Avenue, Greenwich, Connecticut 06830	
10. Attached is an original cutificate of existence, no more than 90 d the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under cath of the translator must be subm	ris not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	promoted in Florida:
Manager and operator of single family residential properties.	
9/1/2	MILAN
	orlzed representative of a member.
penialties of ponicity that the facts stated herein are true.	on of this document consideres an affirmation under the Tam aware that say false information submitted in a third degree felony he provided for in a.817.155, P.S.)
Ellis F. Rinaldi, Authoriz	
Typed or printed r	name of signed

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is: SWAY Management LLC					
If unavailable, t	f unavailable, the alternate to be used in the state of Florida is:				
2. The name at	nd the Florida stree	et address of the registered agent and office are:			
		C T Corporation System			
		(Name)	,		
		1200 South Pine Island Road			
	_				
	Plentation	FL 33324	•		
	****	City/State/Zip			

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 certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

By: Bernadette Baker
(Signature) Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

DACP 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SWAY MANAGEMENT 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 SECOND DAY OF DECEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5347788 8300

131362257

You may verify this certificate online at corp. delaware. oov/authver. shtml

Jeffrey W. Bullock, Socretary of State

DATE: 12-02-13