that my name appears above, or on an attachment with all other like empowered. SIGNATURE: SAMIR JAIEB

MANAGER

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

Entity Name: 7928 WEST DR. LLC

DOCUMENT# L10000079455

Current Principal Place of Business:

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

170 SE 14TH STREET **SUITE 1002** MIAMI, FL 33131

Current Mailing Address:

170 SE 14TH STREET **SUITE 1002** MIAMI, FL 33131 US

FEI Number: 42-1773236

Name and Address of Current Registered Agent:

ARIAS, BETSY 170 SE 14TH STREET **SUITE 1002** MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: BETSY ARIAS			03/18/2016
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	AUTHORIZED MEMBER	
Name	JAIEB, SAMIR	Name	B RYAN, JOSEPH	
Address	170 SE 14TH STREET SUITE 1002	Address	170 SE 14TH STREET SUITE 1002	
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 18, 2016 Secretary of State CC7756296602

> 03/18/2016 Date