

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000158354

**FILED  
Mar 20, 2015  
Secretary of State  
CC3585039727**

**Entity Name:** SW 18 LLC

**Current Principal Place of Business:**

7255 NW 19 STREET  
SUITE E  
MIAMI, FL 33126

**Current Mailing Address:**

7255 NW 19 STREET  
SUITE E  
MIAMI, FL 33126 UN

**FEI Number:** 47-2071712

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CARIOLA, LUIS J  
7255 NW 19 STREET  
SUITE E  
MIAMI, FL 33126 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            MGR  
Name            CARIOLA, LUIS J  
Address        7255 NW 19 STREET SUITE E  
City-State-Zip: MIAMI FL 33126

Title            MGR  
Name            CARIOLA, MARIANO J  
Address        7255 NW 19 STREET SUITE E  
City-State-Zip: MIAMI FL 33126

*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 that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARIANO CARIOLA

**MGR**

**03/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date