

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006798

Entity Name: SIGNAL GP LLC**Current Principal Place of Business:**480 E. SWEDESFORD ROAD
SUITE 350
WAYNE, PA 19087**Current Mailing Address:**480 E. SWEDESFORD ROAD
SUITE 350
WAYNE, PA 19087 US**FEI Number:** 47-0876082**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MANAGER
Name BECERRA, MANUEL JOSE
Address 11222 QUAIL ROOST DRIVE
City-State-Zip: MIAMI FL 33157

Title MANAGER
Name SWACKHAMMER, KIMBERLY LEE
Address 11222 QUAIL ROOST DRIVE
City-State-Zip: MIAMI FL 33157

Title MANAGER
Name BIEN, GREGG
Address 480 E. SWEDESFORD ROAD
SUITE 350
City-State-Zip: WAYNE PA 19087

Title MANAGER
Name O'CALLAGHAN, PAT
Address 480 E. SWEDESFORD ROAD
SUITE 350
City-State-Zip: WAYNE PA 19087

Title MANAGER
Name MARTIN, CAROLYN
Address 480 E. SWEDESFORD ROAD
SUITE 350
City-State-Zip: WAYNE PA 19087

Title SECRETARY
Name ARAGON-CRUZ, JEANNIE AMY
Address 11222 QUAIL ROOST DRIVE
City-State-Zip: MIAMI FL 33157

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: JEANNIE AMY ARAGON-CRUZ**SECRETARY****01/29/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date