

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1200000342

Entity Name: SW7 PARTNERS GP LLC

Current Principal Place of Business:

1111 LINCOLN ROAD SUITE 802
MIAMI BEACH, FL 33139

Current Mailing Address:

1111 LINCOLN ROAD SUITE 802
MIAMI BEACH, FL 33139

FEI Number: 45-4290391

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROSS, WILLIAM J
150 WEST FLAGLER ST.
SUITE 2200
MIAMI, FL 33130 US

FILED
Apr 27, 2016
Secretary of State
CC0700325295

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 SW7 PARTNERS HOLDINGS LLC
Address 1111 LINCOLN ROAD SUITE 802
City-State-Zip: MIAMI BEACH FL 33139

Title PRESIDENT
Name CHERRY, ROBERT
Address 1111 LINCOLN ROAD SUITE 802
City-State-Zip: MIAMI BEACH FL 33139

Title VP
Name SCHRAGER, RONALD
Address 1111 LINCOLN ROAD SUITE 802
City-State-Zip: MIAMI BEACH FL 33139

Title VP
Name WOLPERT, RANDOLPH
Address 1111 LINCOLN ROAD SUITE 802
City-State-Zip: MIAMI BEACH FL 33139

Title VP
Name WODICKA, KEVIN
Address 1111 LINCOLN ROAD SUITE 802
City-State-Zip: MIAMI BEACH FL 33139

Title VP, SECRETARY
Name GOLINSKY, LARRY
Address 1111 LINCOLN ROAD SUITE 802
City-State-Zip: MIAMI BEACH FL 33139

Title VP, TREASURER, ASST. SECRETARY
Name TAGESON, BRIAN
Address 1111 LINCOLN ROAD SUITE 802
City-State-Zip: MIAMI BEACH FL 33139

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: BRIAN TAGESON

VP

04/27/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date