

**2017 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A15000000351

**Entity Name:** ACM FUND II, L.P.

**Current Principal Place of Business:**

9953 SHADOW CREEK DR.  
ORLANDO, FL 32832

**Current Mailing Address:**

9953 SHADOW CREEK DR.  
ORLANDO, FL 32832 US

**FEI Number:** 32-0480867

**Certificate of Status Desired:** No

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

ACYNEUM CAPITAL MANAGEMENT LLC  
9953 SHADOW CREEK DR.  
ORLANDO, FL 32832 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

**General Partner Detail :**

Document # L13000039659  
Name ACYNEUM CAPITAL MANAGEMENT  
LLC  
Address 9953 SHADOW CREEK DR.  
City-State-Zip: ORLANDO FL 32832

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALAMGIR WALI

**MANAGER**

**04/06/2017**

\_\_\_\_\_ Electronic Signature of Signing General Partner Detail

\_\_\_\_\_ Date