I hereby certify that the information indicated on this report or supplemental report is true and accurate and	nd that my electronic signature shall have the sa	me 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 <sup>,</sup> AARON MARLOWE	MANAGER	04/25/2018		

MANAGER

SIGNATURE: AARON MARLOWE

Electronic Signature of Signing Authorized Person(s) Detail

2018 FLORIDA LIMITED LIABILITY COMPAN	IY ANNUAL REPORT

DOCUMENT# L07000122248

Entity Name: AJ PROPERTY MANAGEMENT II, LLC

## **Current Principal Place of Business:**

4332 N.W. 120TH AVENUE CORAL SPRINGS, FL 33065

## **Current Mailing Address:**

4332 N.W. 120TH AVENUE CORAL SPRINGS. FL 33065

## FEI Number: 26-1561659

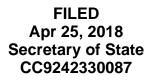
## Name and Address of Current Registered Agent:

M. FUENTES & CO. 201 ALHAMBRA CIRCLE STE 601 MIAMI, FL 33134 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	: MILTON FUENTES			04/25/2018
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	PEQUIGNOT, JOHN	Name	MARLOWE, AARON	
Address	4332 N.W. 120TH AVENUE	Address	4332 N.W. 120TH AVENUE	
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065	

Certificate of Status Desired: No



Date