2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000004905

Entity Name: SM 10000 HOLDINGS II, LLC

Current Principal Place of Business:

2200 BISCAYNE BOULEVARD
MIAMI, FL 33137

Current Mailing Address:

2200 BISCAYNE BOULEVARD
MIAMI, FL 33137

FEI Number: 27-3562823

FILED
Apr 21, 2016
Secretary of State
CC0289416602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEITELMAN, MICHAEL ESQ
2200 BISCAYNE BOULEVARD
MIAMI, FL 33137 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: MICHAEL SHEITELMAN 04/21/2016

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	KAHN, SONNY
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

Title	MGR
Name	MENIN, BRUCE
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

Title	P
Name	ELKOBY, CHAIM
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

Title	SECRETARY
Name	DACHOH, SHLOMO
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

Title	MGR
Name	GALBUT, RUSSELL
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

Title	MGR
Name	BITTEN, TOMER
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

Title	VP
Name	KLEIN, CASEY
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

Title	ASST. TREASURER
Name	DE ALMAGRO, PABLO
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137

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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: RUSSELL W. GALBUT MGR 04/21/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date

Authorized Person(s) Detail Continued :

Title	VP
Name	SHEITELMAN, MICHAEL
Address	2200 BISCAYNE BOULEVARD
City-State-Zip:	MIAMI FL 33137