

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
TOWANDA II, LLLP



Principal Place of Business	Mailing Address
528 HARDEE ROAD CORAL GABLES, FL 33146	528 HARDEE ROAD CORAL GABLES, FL 33146

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State		City & State	
Zip	Country	Zip	Country

01142008 Chg-LP CR2E003 (12/06)

4. FEI Number	Applied For
APPLIED FOR	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MURARO, ELIZABETH M
528 HARDEE ROAD
CORAL GABLES, FL 33146

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE _____

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION13. ADDRESS CHANGES ONLY

DOCUMENT #	L06000076757
NAME	TOWANDA II, LLC
STREET ADDRESS	528 HARDEE ROAD
CITY - ST - ZIP	CORAL GABLES, FL 33146

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS

CITY, ST., ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

SIGNATURE: Elizabeth M. Muraro ELIZABETH M. MURARO 3/11/08 305-661-8292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date _____

Daytime Phone # _____