

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030423

FILED
May 02, 2011
Secretary of State

Entity Name: REGIS INVESTMENTS MANAGEMENT II, LLC

Current Principal Place of Business:

11000 SW 83 AVENUE
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

11000 SW 83 AVENUE
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 82-0572532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALADRIGAS, CARLOS A
11000 SW 83 AVENUE
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

SALADRIGAS, CARLOS A SR.
11000 SW 83 AVENUE
MIAMI, FL 33156 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: CARLOS A. SALADRIGAS

05/02/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SALADRIGAS, CARLOS A SR.
Address: 11000 S.W. 83 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM
Name: SALADRIGAS, OLGA M CARLOS
Address: 11000 SW 83 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: D
Name: SANCHEZ, JOSE M JR.
Address: C/O 355 ALHAMBRA CIRCLE, SUITE 801
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D
Name: SALADRIGAS, CARLOS M JR.
Address: 11000 SW 83 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: D
Name: SALADRIGAS, ELISA MARIA C CARLOS
Address: 11000 SW 83 AVENUE
City-St-Zip: MIAMI, FL 33156 US

Title: D
Name: SALADRIGAS, LUIS R
Address: 11000 SW 83 AVENUE
City-St-Zip: MIAMI, FL 33156 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CARLOS A. SALADRIGAS

D

05/02/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date