

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000043106

1. Entity Name
AWF ASSOCIATES II, LLC



Principal Place of Business
95 MERRICK WAY
SUITE 380
CORAL GABLES, FL 33134

Mailing Address
95 MERRICK WAY
SUITE 380
CORAL GABLES, FL 33134



03132006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2631001

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAXTER, JEFFREY L
15500 NEW BARN ROAD
SUITE 104
MIAMI LAKES, FL 33014

**DO NOT WRITE
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
BLANCO, GRACE
95 MERRICK WAY, SUITE 380
CORAL GABLES, FL 33134

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U00000520334
05/02/06-80092-001 50.00

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IN THIS SPACE**

11. 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 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:

Blanco

3/13/06

(305) 446-0011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #