

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000144807

**Entity Name:** AWS GROUP LLC

**Current Principal Place of Business:**

18305 BISCAYNE BLVD SUITE 302  
AVENTURA, FL 33160

**Current Mailing Address:**

18305 BISCAYNE BLVD SUITE 302  
AVENTURA, FL 33160 US

**FEI Number:** 47-4980166

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WALDMAN, OSCAR  
18305 BISCAYNE BLVD SUITE 302  
AVENTURA, FL 33160 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

|                 |                               |                 |                               |
|-----------------|-------------------------------|-----------------|-------------------------------|
| Title           | MGR                           | Title           | MGR                           |
| Name            | MIZARBA LLC                   | Name            | JUMA VENTURES LLC             |
| Address         | 18305 BISCAYNE BLVD SUITE 302 | Address         | 18305 BISCAYNE BLVD SUITE 302 |
| City-State-Zip: | AVENTURA FL 33160             | City-State-Zip: | AVENTURA FL 33160             |

*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:** OSCAR WALDMAN

**MGR**

**02/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date