

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000011350

Entity Name: SABABA PARTNERS II LLC**Current Principal Place of Business:**500 SOUTH POINTE DR, STE. 240
MIAMI BEACH, FL 33139**Current Mailing Address:**500 SOUTH POINTE DR, STE. 240
MIAMI BEACH, FL 33139 US**FEI Number:** 81-2675762**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARIPOSA CAPITAL, LLC
500 SOUTH POINTE DR, STE. 240
MIAMI BEACH, FL 33139 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, MBR
Name	FRANKLIN, MARTIN E
Address	500 SOUTH POINTE DR, STE. 240
City-State-Zip:	MIAMI BEACH FL 33139

Title	CFO
Name	DESTEFANO, DESIREE
Address	500 SOUTH POINTE DR, STE. 240
City-State-Zip:	MIAMI BEACH FL 33139

Title	ACCOUNTING MGR
Name	TORRES, WENDY
Address	500 SOUTH POINTE DR, STE. 240
City-State-Zip:	MIAMI BEACH FL 33139

Title	VP
Name	FRANKLIN, ROBERT
Address	500 SOUTH POINTE DR, STE. 240
City-State-Zip:	MIAMI BEACH FL 33139

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: WENDY TORRES**ACCOUNTING MANAGER** 01/07/2022_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date