2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080195

Entity Name: LAFAYETTE SQUARE II LLC

Current Principal Place of Business:

120 FORBES BLVD.

SUITE 180

MANSFIELD, MA 02048-1150

Current Mailing Address:

120 FORBES BLVD.

SUITE 180

MANSFIELD, MA 02048-1150 US

FEI Number: 20-3338594 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCDONOUGH, BRIAN M ESQ.

2200 MUSEUM TOWER, 150 WEST FLAGLER STREET

MIAMI, FL 33130 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: BRIAN MCDONOUGH 02/12/2024

Electronic Signature of Registered Agent

Date

FILED Feb 12, 2024

Secretary of State

9922029027CC

Authorized Person(s) Detail:

Title **AUTHORIZED MEMBER** Title AUTHORIZED MEMBER MARC. PLONSKIER S DAVID. CANEPARI J Name Name Address 120 FORBES BLVD. Address 120 FORBES BLVD.

> SUITE 180 **SUITE 180**

MANSFIELD MA 02048-1150 MANSFIELD MA 02048-1150 City-State-Zip: City-State-Zip:

Title **MANAGER** Title AUTHORIZED REPRESENTATIVE

THE GATEHOUSE GROUP, INC. O'BRIEN, COLEEN D Name Name

120 FORBES BLVD. Address 120 FORBES BLVD. Address **SUITE 180**

SUITE 180

MANSFIELD MA 02048-1150 MANSFIELD MA 02048-1150 City-State-Zip: City-State-Zip:

AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE Title Title

YORKSHAITIS, ROGER LEONARDO, CHRISTOPHER Name Name

120 FORBES BLVD. 120 FORBES BLVD. Address Address

> SUITE 180 **SUITE 180**

MANSFIELD MA 02048-1150 City-State-Zip: MANSFIELD MA 02048-1150 City-State-Zip:

Title **AUTHORIZED REPRESENTATIVE**

LEO, JENNIFER S Name Address 120 FORBES BLVD.

SUITE 180

City-State-Zip: MANSFIELD MA 02048-1150

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.

02/12/2024 **AUHTORIZED MEMBER** SIGNATURE: MARC S PLONSKIER

Electronic Signature of Signing Authorized Person(s) Detail

Date