

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000043510

**Entity Name:** N SQUARED MANAGEMENT, LLC

**Current Principal Place of Business:**

5959 COLLINS AVE.  
APT. 1006  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

1509 ISLAND WAY  
WESTON, FL 33326 US

**FEI Number:** 46-2682573

**Certificate of Status Desired:** No

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

PORTNOY, FRED J PRESIDENT  
1509 ISLAND WAY  
WESTON, FL 33326 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:** FRED J PORTNOY

04/24/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name NAGPAL, NARESH  
Address 5959 COLLINS AVENUE, APT. 1006  
City-State-Zip: MIAMI BEACH FL 33140

Title MANAGER  
Name PORTNOY, FRED  
Address 1509 ISLAND WAY  
City-State-Zip: WESTON FL 33326

Title TREASURER  
Name KIRSCHNER, ANN M  
Address 20503 KYLEMORE DRIVE  
City-State-Zip: STRONGSVILLE OH 44149

*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:** ANN KIRSCHNER

TREASURER

04/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date