

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000066586

Entity Name: LSBK06-08, L.L.C.**Current Principal Place of Business:**215 VIA DEL MAR
PALM BEACH, FL 33480**Current Mailing Address:**C/O SILVERMAN GROUP
195 MORRISTOWN ROAD
BASKING RIDGE, NJ 07920 US**FEI Number:** 20-8067445**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WOLMER, BRENT GESQ.
712 US HIGHWAY ONE, STE. 400
NORTH PALM BEACH, FL 33408 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 | MGRM |
| Name | SILVERMAN, KENNETH |
| Address | 215 VIA DEL MAR |
| City-State-Zip: | PALM BEACH FL 33480 |

| | |
|-----------------|---------------------|
| Title | MGRM |
| Name | SILVERMAN, BLAKE |
| Address | 215 VIA DEL MAR |
| City-State-Zip: | PALM BEACH FL 33480 |

| | |
|-----------------|-------------------|
| Title | MANAGING MEMBER |
| Name | SEIDMAN, LAWRENCE |
| Address | 19 VETERI PLACE |
| City-State-Zip: | WAYNE NJ 07470 |

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: LAWRENCE SEIDMAN**MEMBER****01/22/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date