## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001866

Entity Name: COMPASS TWO, LLC

**Current Principal Place of Business:** 

2400 YORKMONT ROAD C/O TAX DEPT CHARLOTTE, NC 28217

**Current Mailing Address:** 

2400 YORKMONT ROAD C/O TAX DEPT CHARLOTTE, NC 28217

FEI Number: 56-2256592 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE, FL 32301 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

**FILED** Apr 05, 2024

**Secretary of State** 

6751998117CC

## Authorized Person(s) Detail:

Title	SOLE MEMBER	Title	PRESIDENT & CFO
Name	COMPASS GROUP USA, INC.	Name	MEREDITH, ADRIAN
Address	2400 YORKMONT RD	Address	2400 YORKMONT ROAD
City-State-Zip:	CHARLOTTE NC 28217	City-State-Zip:	CHARLOTTE NC 28217

Title EXE VP, GENERAL COUNSEL & Title SR VICE PRESIDENT, TREASURER

Name

Title

City-State-Zip:

Address

**SECRETARY** 

MCCONNELL, JENNIFER

2400 YORKMONT ROAD

CHARLOTTE NC 28217

ASST SECRETARY

Name THOMAS, DANIEL Address 2400 YORKMONT ROAD

City-State-Zip:

CHARLOTTE NC 28217

City-State-Zip: CHARLOTTE NC 28217

Title ASST SECRETARY Name BRIOTTE, KRISTEN Address 2400 YORKMONT ROAD City-State-Zip: CHARLOTTE NC 28217

Name ROSSITCH, RICHARD 2400 YORKMONT ROAD Address

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: JENNIFER MCCONNELL

**EXECUTIVE VICE** PRESIDENT, GENERAL **COUNSEL & SECRETARY**  04/05/2024