

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000001218

**Entity Name:** LAVALIERE CAPITAL MANAGEMENT, LLC

**Current Principal Place of Business:**

2054 VISTA PARKWAY, STE 400  
WEST PALM BCH, FL 33411

**Current Mailing Address:**

2054 VISTA PARKWAY, STE400  
WEST PALM BCH, FL 33411 US

**FEI Number: 82-5066085**

**Certificate of Status Desired: No**

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

REGISTERED AGENTS INC.  
7901 4TH ST N STE 300  
ST PETERSBURG, FL 33702 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 MBR  
Name SAGUL, RYAN  
Address 2054 VISTA PARKWAY, STE 400  
City-State-Zip: WEST PALM BCH FL 33411

Title MBR  
Name SAGUL, NATHANIEL  
Address 2054 VISTA PARKWAY, STE 400  
City-State-Zip: WEST PALM BCH FL 33411

Title MBR  
Name MCCOY, MATTHEW  
Address 2054 VISTA PARKWAY, STE 400  
City-State-Zip: WEST PALM BCH FL 33411

Title MBR  
Name ALKURD, IBRAHIM  
Address 2054 VISTA PARKWAY, STE 400  
City-State-Zip: WEST PALM BCH FL 33411

*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: MATTHEW MCCOY**

**PARTNER**

**04/05/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date