

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000432117

**Entity Name:** TREMONT PARTNERS II, LLC

**Current Principal Place of Business:**

639 E OCEAN AVE STE 309  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

639 E OCEAN AVE STE 309  
BOYNTON BEACH, FL 33435 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

DITTAMI, AMY S  
639 E OCEAN AVE STE 309  
BOYNTON BEACH, FL 33435 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 MGR  
Name SLATER, KENNETH Z  
Address 639 E OCEAN AVE STE 309  
City-State-Zip: BOYNTON BEACH FL 33435

Title VP  
Name DIRRAMI, AMY S  
Address 639 E OCEAN AVE STE 309  
City-State-Zip: BOYNTON BEACH FL 33435

*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:** SLATER , KENNETH Z

**MGR**

**01/26/2024**

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

\_\_\_\_\_  
Date