

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000000740

**Entity Name:** TTSI GP, LLC

**Current Principal Place of Business:**

5200 TOWN CENTER CIR 4TH FLR  
BOCA RATON, FL 33486

**Current Mailing Address:**

5200 TOWN CENTER CIR 4TH FLR  
BOCA RATON, FL 33486 US

**FEI Number:** 98-1643614

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           MANAGER  
Name           GARFF, MATTHEW  
Address        5200 TOWN CENTER CIR 4TH FLR  
City-State-Zip: BOCA RATON FL 33486

Title           AUTHORIZED REPRESENTATIVE  
Name           POLITOSKI, JOSEPH M  
Address        5200 TOWN CENTER CIR 4TH FLR  
City-State-Zip: BOCA RATON FL 33486

*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:** POLITOSKI, M JOSEPH

**AUTHORIZED  
REPRESENTATIVE**

**04/24/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date