

Annual Report for the year: 2019 **Limited Liability Company**

→ Filing period. September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000790936	2. Exact name of the Limited Liability Company Firefly MA Investments II, LLC					
3. NAICS Code 523920	4. Brief description of the character of business conducted in Rhode Island asset management					
5. State of Formation Massachusetts						
6. Principal Office Address 601 West 26th Street, Suite 1520			City New York	State NY	Zip 10001	
7. Mailing Address of Limited Lia	bility Compa	iny and Name or	Title of Contact Person			
Contact Name Dan Jemal			Contact Title Chief Finan	Contact Title Chief Financial Officer		
Street Address 601 West 26th Street, Suite 1520			City New York	State NY	Z ^{ip} 10001	
8. List ALL managers (names a	nd addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Wanager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Z:p	
	1		1	Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
Under penalty of perjury, I dec statements, and that all stater				ng any accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
Dan Jemal				Octobe	October 17, 2019	
Signature of Authorized Person SIGN DOCUMENT HERF						
//						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

OCT 18 2019

FORM 632 - Revised: 10/2017