

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061884

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** SOGAARD INTERNATIONAL LLC.

**Current Principal Place of Business:**

2020 NW 129TH AVE.  
206  
MIAMI, FL 33182 US

**New Principal Place of Business:**

**Current Mailing Address:**

2121 PONCE DE LEON BLVD  
240  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** ☐ **FEI Number Applied For (X)** ☒ **FEI Number Not Applicable ( )** ☐ **Certificate of Status Desired (X)** ☒

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

PRATS FERNANDEZ & CO.  
2121 PONCE DE LEON BLVD.  
240  
CORAL GABLES, FL 33134 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PONS, RAUL M  
Address: 2020 NW 129TH AVE. SUITE 206  
City-St-Zip: MIAMI, FL 33182 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: RAUL M. PONS

MGR

04/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date