

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000006355

**Entity Name:** SQGROUP LLC

**Current Principal Place of Business:**

4700 SW 51ST STREET  
SUITE 202  
DAVIE, FL 33314

**Current Mailing Address:**

4700 SW 51ST STREET  
SUITE 202  
DAVIE, FL 33314 US

**FEI Number:** 27-4847976

**Certificate of Status Desired:** Yes

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

D'AMBROSIO, DANIELE  
4700 SW 51ST STREET  
SUITE 202  
DAVIE, FL 33314 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 D'AMBROSIO, DANIELE  
Address 966 NAUTILUS ISLE  
City-State-Zip: DANIA BEACH FL 33004

Title MGR  
Name BAKER, COLIN  
Address 13201 SW 53RD STREET  
City-State-Zip: MIRAMAR FL 33027

Title MGR  
Name SPAMPINATO, FABRIZIO  
Address 7601 EAST TREASURE DRIVE  
APT 2023  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title MGR  
Name OCHOA, PAULA  
Address 5469 WARD LAKE DR  
City-State-Zip: PORT ORANGE FL 32128

*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:** COLIN BAKER

**MANAGER**

**03/01/2022**

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

\_\_\_\_\_  
Date