

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000099000

Entity Name: SAGROVE LLC**Current Principal Place of Business:**2600 S DOUGLAS ROAD
SUITE 609
CORAL GABLES, FL 33134**Current Mailing Address:**2600 S DOUGLAS ROAD
SUITE 609
CORAL GABLES, FL 33134 US**FEI Number:** 45-3659069**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FRAGA, ALBERT J
2600 S DOUGLAS ROAD
SUITE 610
CORAL GABLES, FL 33134 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 MGRM, PRESIDENT, SECRETARY,
TREASURER

Name SAYEGH, FOUAD

Address 2600 S DOUGLAS ROAD
SUITE 609

City-State-Zip: CORAL GABLES FL 33134

Title MGRM

Name SAYEGH, NELSON

Address 2600 S DOUGLAS ROAD
SUITE 609

City-State-Zip: CORAL GABLES FL 33134

Title VP

Name SAYEGH, MICHEL

Address 2600 S DOUGLAS ROAD
SUITE 609

City-State-Zip: CORAL GABLES FL 33134

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: MICHEL SAYEGH

VP

02/09/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date