

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000213039

Entity Name: SAN GIULIANO 15, LLC**Current Principal Place of Business:**890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146**Current Mailing Address:**890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146 US**FEI Number:** 90-1470298**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CEBALLOS, HAYDEE CPA
890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 22146 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 AMBR
Name DPG INVESTMENT
Address AVE PRESIDENTE WILSON 1230
MOOCA
City-State-Zip: SAO PAULO 03107--901

Title AMBR
Name SMA GLOBAL INVESTMENTS LTD
Address RUA CAMARGO CABRAL30-AP 31
ITAIM
City-State-Zip: SAO PAULO AL 01453

Title MGR
Name LORENZETTI, MARIO E
Address AVE PRESIDENTE WILSON 1230
MOOCA
City-State-Zip: SAO PAULO SP 03107--901

Title AMBR
Name MARVIN MANAGEMENT LIMITED
Address AVE PRESIDENTE WILSON 1230
MOOCA
City-State-Zip: SAO PAULO SP 03107--901

Title MGR
Name LORENZETTI, CLAUDIO L
Address AVE PRESIDENTE WILSON 1230
MOOCA
City-State-Zip: SAO PAULO SP 03107--901

Title MGR
Name LORENZETTI BASSETO, ADRIANO
Address RUA CAMARGO CABRAL 30-AP 31
ITAIM
City-State-Zip: SAO PAULO SP 01453--090

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: CLAUDIO L LORENZETTI

MGR

04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date