

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000349951

Entity Name: SGA INSURANCE GROUP, LLC

Current Principal Place of Business:

6941 SW 196 AVE
SUITE# 11
PEMBROKE PINES, FL 33332

Current Mailing Address:

5453 SW 186TH WAY
MIRAMAR, FL 33029 US

FEI Number: 85-3948244

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MELENDEZ VEGA LLC
7500 NW 25TH STREET
SUITE 105
MIAMI, FL 33122 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 SANCHEZ, SAUL G
Address 5453 SW 186TH WAY
City-State-Zip: MIRAMAR FL 33029

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: SAUL SANCHEZ

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date