

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000126531

**Entity Name:** SOPMAC SJ, LLC

**Current Principal Place of Business:**

11790 SAINT ANDREWS PLACE  
207  
WELLINGTON, FL 33414

**Current Mailing Address:**

11790 SAINT ANDREWS PLACE  
207  
WELLINGTON, FL 33414 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HOLGUIN CAMPOS, HERNANDO  
11790 SAINT ANDREWS PLACE  
207  
WELLINGTON, FL 33414 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 MR  
Name HOLGUIN, HERNANDO  
Address 11790 SAINT ANDREWS PLACE  
207  
City-State-Zip: WELLINGTON FL 33414

Title MISS  
Name HOLGUIN, ANA  
Address 11790 SAINT ANDREWS PLACE  
207  
City-State-Zip: WELLINGTON FL 33414

*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:** HERNANDO HOLGUIN

MANAGER

02/02/2024

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

\_\_\_\_\_  
Date