

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000303644

**Entity Name:** SGSMILE LLC

**Current Principal Place of Business:**

11600 NW 60 TER UNIT 489  
MIAMI, FL 33178

**Current Mailing Address:**

11600 NW 60 TER UNIT 489  
MIAMI, FL 33178 US

**FEI Number:** 87-1490249

**Certificate of Status Desired:** No

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

GOMEZ SAAVEDRA, SILVIA  
11600 NW 60 TER UNIT 489  
MIAMI, FL 33178 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 GOMEZ SAAVEDRA, SILVIA  
Address 11600 NW 60 TER UNIT 489  
City-State-Zip: MIAMI FL 33178

*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:** GOMEZ SAAVEDRA , SILVIA

AMBR

02/22/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date