

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000398096

**Entity Name:** BGI ACQUISITIONS HOLDINGS LLC

**Current Principal Place of Business:**

2100 PONCE DE LEON BLVD  
SUITE 1260  
CORAL GABLES, FL 33160

**Current Mailing Address:**

2100 PONCE DE LEON BLVD  
SUITE 1260  
CORAL GABLES, FL 33160 US

**FEI Number:** 61-2006164

**Certificate of Status Desired:** No

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

FREIRE, DAVID  
2100 PONCE DE LEON BLVD  
SUITE 1260  
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            AMBR  
Name            ORDOSGOITI, ORIANA  
Address        2100 PONCE DE LEON BLVD SUITE  
                  1260  
City-State-Zip: CORAL GABLES FL 33134

Title            MGR  
Name            CASTILLO, ANTHONY J  
Address        2100 PONCE DE LEON BLVD SUITE  
                  1260  
City-State-Zip: CORAL GABLES FL 33134

Title            AMBR  
Name            FREIRE, DAVID  
Address        2100 PONCE DE LEON BLVD, SUITE  
                  1260  
City-State-Zip: CORAL GABLES FL 33160

*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:** DAVID FREIRE

AMBR

02/02/2022

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

\_\_\_\_\_  
Date