

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000488093

**Entity Name:** SGA SOLUTIONS, LLC

**Current Principal Place of Business:**

5001 SW 20TH ST  
UNIT 3809  
OCALA, FL 34474

**Current Mailing Address:**

5001 SW 20TH ST  
UNIT 3809  
OCALA, FL 34474

**FEI Number:** 87-3679393

**Certificate of Status Desired:** No

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

CARMONA, GABRIEL  
5001 SW 20TH ST  
UNIT 3809  
OCALA, FL 34474 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 MGR  
Name CARMONA, GABRIEL  
Address 5001 SW 20TH ST UNIT 3809  
City-State-Zip: Ocala FL 34474

Title MGR  
Name FRANCISCONI, SANDRA  
Address 5001 SW 20TH ST UNIT 3809  
City-State-Zip: Ocala FL 34474

*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:** GABRIEL CARMONA

MGR

03/14/2022

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

\_\_\_\_\_  
Date