2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000007959

Entity Name: SG ASSETS, LLC

Current Principal Place of Business:

3156 NORTH VALLEY PIKE HARRISONBURG, VA 22802

Current Mailing Address:

3156 NORTH VALLEY PIKE HARRISONBURG, VA 22802 US

FEI Number: 47-1767580 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: PETER TRAWINSKI 01/23/2020

Electronic Signature of Registered Agent

Date

FILED Jan 23, 2020

Secretary of State

1852126646CC

Authorized Person(s) Detail :

Title PCEO, DIRECTOR Title VΡ

HEYDON, TIMOTHY KARP, PHILLIP Name Name

3156 NORTH VALLEY PIKE 3156 NORTH VALLEY PIKE Address Address City-State-Zip: HARRISONBURG VA 22802 HARRISONBURG VA 22802 City-State-Zip:

Title DIRECTOR Title SECRETARY, TREASURER

Name JONSSON, ULF Name OWEN, RICHARD

Address 3156 NORTH VALLEY PIKE Address 3156 NORTH VALLEY PIKE HARRISONBURG VA 22802 City-State-Zip: HARRISONBURG VA 22802 City-State-Zip:

Title DIRECTOR Title **DIRECTOR**

Name MIXER, BRIAN Name KRISHNAN, SANJEEV

Address 3156 NORTH VALLEY PIKE 3156 NORTH VALLEY PIKE Address HARRISONBURG VA 22802 City-State-Zip: HARRISONBURG VA 22802 City-State-Zip:

Title DIRECTOR Title DIRECTOR PRATT, LARRY Name MURPHY, SCOTT Name

3156 NORTH VALLEY PIKE Address 3156 NORTH VALLEY PIKE Address City-State-Zip: HARRISONBURG VA 22802 HARRISONBURG VA 22802 City-State-Zip:

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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: RICHARD OWEN

IT ADMIN / BUSINESS **RECORDS**

01/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title DIRECTOR

Name HENDERSON, DAVE

Address 3156 NORTH VALLEY PIKE
City-State-Zip: HARRISONBURG VA 22802