

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000010084

Entity Name: FULL GAUGE CONTROLS LLC**Current Principal Place of Business:**150 SE 2ND AVE
SUITE 1403
MIAMI, FL 33131**Current Mailing Address:**150 SE 2ND AVE
SUITE 1403
MIAMI, FL 33131 US**FEI Number:** 32-0479237**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DRUMMOND CONSULTING LLC
601 BRICKELL KEY DR SUITE 901
MIAMI, FL 33131 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 | MGRM |
| Name | GOBBI, IVANIR |
| Address | RUA BAGE 613 |
| City-State-Zip: | CANOAS RS 92120-190 |
| Title | MGR |
| Name | MARCHI, LUCAS |
| Address | CLEMENTE PINTO, 134 APT 305 |
| City-State-Zip: | CANOAS RS 92025-290 |

| | |
|-----------------|---|
| Title | MGRM |
| Name | PERGUER, FLAVIO |
| Address | RUA PROFESSOR JOAO DE SOUZA RIBEIRO 859 |
| City-State-Zip: | PORTO ALEGRE RIO GRANDE DO SUL 90245-470 |

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: IVANIR GOBBI

MGRM

07/13/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date