

2024 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	JUNIOR, RODNEI AHRENS P.
Address	AV. WILLY EUGENIO FLECK 1495, CS45
City-State-Zip:	PORTO ALEGRE, RS PORTO ALEGRE, RS OC
Title	MGR
Name	PERGUER, FLAVIO
Address	RUA PROF. JOAO SOUZA RIBEIRO, 859
City-State-Zip:	PORTO ALEGRE, RS FL

Title	MGRM
Name	PERGUER, FLAVIO
Address	RUA PROFESSOR JOAO DE SOUZA RIBEIRO 859
City-State-Zip:	PORTO ALEGRE RIO GRANDE DO SUL 90245-470
Title	MGR
Name	GOBBI, IVANIR
Address	RUA BAGE, 613
City-State-Zip:	CANOAS, RS OC

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: GOBBI, IVANIR

MGRM

04/17/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date