

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000263823

**Entity Name:** SOGNI REALIZZATI, LLC

**Current Principal Place of Business:**

1411 SUNSET DRIVE  
CORAL GABLE, FL 33143

**Current Mailing Address:**

1411 SUNSET DRIVE  
CORAL GABLE, FL 33143 US

**FEI Number:** 83-2683526

**Certificate of Status Desired:** Yes

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

THE SARIOL GROUP, LLC  
8200 NW 41ST STREET  
SUITE 315  
DORAL, FL 33166 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:** FRANK R SARIOL FOR THE SARIOL GROUP, LLC

04/07/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                    |                 |                               |
|-----------------|------------------------------------|-----------------|-------------------------------|
| Title           | MGR                                | Title           | MGR                           |
| Name            | DONNARUMMA VEITIA, JENNY L         | Name            | DOMINGUEZ FELIZOLA, OSMAN J   |
| Address         | 8200 NW 41ST STREET SUITE 315      | Address         | 8200 NW 41ST STREET SUITE 315 |
| City-State-Zip: | DORAL FL 33166                     | City-State-Zip: | DORAL FL 33166                |
|                 |                                    |                 |                               |
| Title           | MGR                                |                 |                               |
| Name            | DOMINGUEZ DONNARUMMA,<br>VANESSA A |                 |                               |
| Address         | 8200 NW 41ST STREET SUITE 315      |                 |                               |
| City-State-Zip: | DORAL FL 33166                     |                 |                               |

*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:** OSMAN J DOMINGUEZ FELIZOLA

MANAGER

04/07/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date