

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000158181

**Entity Name:** VCG PARTNERS LLC

**Current Principal Place of Business:**

4000 HOLLYWOOD BLVD  
SUITE 555-S  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

4000 HOLLYWOOD BLVD  
SUITE 555-S  
HOLLYWOOD, FL 33021 US

**FEI Number:** 37-2000684

**Certificate of Status Desired:** No

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

ARKIN, AVIV E CPA  
4000 HOLLYWOOD BLVD  
STE 555-S  
HOLLYWOOD, FL 33021 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           MANAGER  
Name           VITE JIMENEZ, RODOLFO A  
Address        4000 HOLLYWOOD BLVD  
                  SUITE 555-S  
City-State-Zip: HOLLYWOOD FL 33021

Title           MGR  
Name           AZCUE, PETER PAULO  
Address        495 BRICKELL AVE, APT 2701  
City-State-Zip: MIAMI FL 33131

Title           AUTHORIZED MEMBER  
Name           VCG PARTNERS ASESORES Y  
                  CAPACITADORES SA DE CV  
Address        4000 HOLLYWOOD BLVD  
                  SUITE 555-S  
City-State-Zip: HOLLYWOOD FL 33021

*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:** RODOLFO A VITE JIMENEZ

**MANAGER**

**04/10/2022**

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

\_\_\_\_\_  
Date