

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M0700000098

**Entity Name:** SCG ATLAS WATERWAYS, L.L.C.

**Current Principal Place of Business:**

591 WEST PUTNAM AVENUE  
GREENWICH, CT 06830

**Current Mailing Address:**

591 WEST PUTNAM AVENUE  
GREENWICH, CT 06830 US

**FEI Number:** 20-8111534

**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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name SCG ATLAS WATERWAYS HOLDINGS,  
L.L.C.  
Address 591 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

Title AUTHORIZED REPRESENTATIVE  
Name KANE, JAMES  
Address 591 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

Title AUTHORIZED REPRESENTATIVE  
Name AHLS, PAUL  
Address 591 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

Title AUTHORIZED REPRESENTATIVE  
Name SOSS, BRIAN  
Address 591 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

Title AUTHORIZED REPRESENTATIVE  
Name PANZA, ANDRES  
Address 591 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

*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:** JAMES KANE

**AUTHORIZED  
REPRESENTATIVE**

**04/20/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date