

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000070850

Entity Name: SIMM CLAIM SERVICES, LLC**Current Principal Place of Business:**235 140TH AVENUE E
MADEIRA BEACH, FL 33708**Current Mailing Address:**235 140TH AVENUE E
MADEIRA BEACH, FL 33708 US**FEI Number:** 46-2807998**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHIRMER, DANIEL
126 SW 97TH TER
CORAL SPRINGS, FL 33071 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:** DANIEL SCHIRMER

01/11/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	MCKINNEY, JONATHAN
Address	12084 BULL PINE BLVD. JACKSONVILLE, FLORIDA
City-State-Zip:	JACKSONVILLE FL 32224

Title	MGR
Name	SCHIRMER, DANIEL
Address	126 SW 97TH TER
City-State-Zip:	CORAL SPRINGS FL 33071

Title	MGR
Name	MOBERLY, PAUL
Address	235 140TH AVENUE E
City-State-Zip:	MADEIRA BEACH FL 33708

Title	MGR
Name	INGRAM, EDWARD
Address	2704 E. COMMUNITY DRIVE
City-State-Zip:	JUPITER FL 33458

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: DANIEL SCHIRMER

MANAGER

01/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date