

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000195719

**Entity Name:** CIRRUSUP, LLC

**Current Principal Place of Business:**

4237 SALISBURY ROAD  
BLDG 1, STE 109  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

PO BOX 551255  
JACKSONVILLE, FL 32255 US

**FEI Number:** 47-2470998

**Certificate of Status Desired:** No

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

ATTER, HELEN  
333-1 EAST MONROE ST  
JACKSONVILLE, FL 32202 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 DIGESARE, JOHN  
Address PO BOX 551255  
City-State-Zip: JACKSONVILLE FL 32255

Title MANAGER  
Name MAX, GROSSLING  
Address PO BOX 551255  
City-State-Zip: JACKSONVILLE FL 32255

Title MANAGER  
Name TROUTMAN, JAMES  
Address PO BOX 551255  
City-State-Zip: JACKSONVILLE FL 32255

Title MANAGER  
Name MCCRARY, MARK  
Address PO BOX 551255  
City-State-Zip: JACKSONVILLE FL 32255

*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:** MAX GROSSLING

**CEO**

**03/04/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date