# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L21000229557

#### Entity Name: NIMA SOLUTIONS LLC

# Current Principal Place of Business:

10800 DYLAN LOREN CIRCLE STE 103 ORLANDO, FL 32825

# **Current Mailing Address:**

10800 DYLAN LOREN CIRCLE STE 103 ORLANDO, FL 32825 UN

### FEI Number: 87-0962930

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

CHAVARRIAGA, MAURICIO 10800 DYLAN LOREN CIRCLE STE 103 ORLANDO, FL 32825 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

## Authorized Person(s) Detail :

| Authonized Person(s) Detail. |                 |                                     |                 |                                     |
|------------------------------|-----------------|-------------------------------------|-----------------|-------------------------------------|
|                              | Title           | MGR                                 | Title           | MGR                                 |
|                              | Name            | CHAVARRIAGA, MAURICIO               | Name            | RODRIGUEZ, NICOLE                   |
|                              | Address         | 10800 DYLAN LOREN CIRCLE<br>STE 103 | Address         | 10800 DYLAN LOREN CIRCLE<br>STE 103 |
|                              | City-State-Zip: | ORLANDO 32825                       | City-State-Zip: | ORLANDO 32825                       |

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: MAURICIO CHAVARRIAGA

MANAGER

02/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

Date