

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000435033

**Entity Name:** CLA&PAOLA LLC

**Current Principal Place of Business:**

5122 NORTHRIDGE RD  
UNIT 112  
SARASOTA, FL 34238

**Current Mailing Address:**

5122 NORTHRIDGE RD  
UNIT 112  
SARASOTA, FL 34238 US

**FEI Number:** 93-3511561

**Certificate of Status Desired:** No

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

CASCELLA, SEBASTIANO  
5122 NORTHRIDGE RD  
UNIT 112  
SARASOTA, FL 34238 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 MGR  
Name CASCELLA, SEBASTIANO  
Address 5122 NORTHRIDGE RD, UNIT 112  
City-State-Zip: SARASOTA FL 34238

Title MGR  
Name CARABELLESE, GIULIO  
Address 5122 NOTHRIDGE RD, UNIT 112  
City-State-Zip: SARASOTA FL 34238

*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:** SEBASTIANO CASCELLA

MR

02/06/2024

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

\_\_\_\_\_  
Date