2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000097341

Entity Name: KLACORALGABLES, LLC

Current Principal Place of Business:

4573 PONCE DE LEON BLVD. CORAL GABLES. FL 33146

Current Mailing Address:

4573 PONCE DE LEON BLVD. CORAL GABLES. FL 33146 US

FEI Number: 61-1572286 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRISTINA MORENO P.A. 2600 DOUGLAS ROAD SUITE 304 CORAL GABLES, FL 33134 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:

Name

Electronic Signature of Registered Agent

Date

FILED Feb 22, 2024

Secretary of State

1549495944CC

Authorized Person(s) Detail:

PRESIDENT Title Title CONTROLLER

ORTEGA, ROBERTO X. GRIMES, DANA M Name

Address 1750 CORAL WAY Address 1750 CORAL WAY

SUITE 301 SUITE 301

MIAMI FL 33145 City-State-Zip: MIAMI FL 33145 City-State-Zip:

VΡ Title TREASURER AND SECRETARY Title

Name MORLA, MARIA DEL CARMEN Name DE MORLA, MARIA DEL CARMEN

1750 CORAL WAY Address Address 1750 CORAL WAY SUITE 301

SUITE 301

MIAMI FL 33145 MIAMI FL 33145 City-State-Zip: City-State-Zip:

Title **MANAGER** ISAIAS, LUIS N Name 1750 CORAL WAY Address

SUITE 301

MIAMI FL 33145 City-State-Zip:

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: DANA GRIMES CONTROLLER

Electronic Signature of Signing Authorized Person(s) Detail

02/22/2024 Date