

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000249640

**Entity Name:** VALERY SWIMWEAR LLC

**Current Principal Place of Business:**

8386 NW 56 ST  
DORAL, FL 33166

**Current Mailing Address:**

8386 NW 56 ST  
DORAL, FL 33166 US

**FEI Number:** 82-3654816

**Certificate of Status Desired:** No

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

VARESANO, CLAUDIA  
8386 NW 56 ST  
DORAL, FL 33166 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:** CLAUDIA VARESANO

06/14/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name VARESANO, CLAUDIA  
Address 18405 SW 79 CT  
City-State-Zip: CUTLER BAY FL 33157

*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:** CLAUDIA VARESANO

OWNER

06/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date