## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000025403

Entity Name: IRREPAIR, LLC

### **Current Principal Place of Business:**

3433 CYPRESS POINT CIRCLE SAINT CLOUD, FL 34772

# **Current Mailing Address:**

3433 CYPRESS POINT CIRCLE SAINT CLOUD, FL 34772 US

## FEI Number: 84-4342426

# Name and Address of Current Registered Agent:

CABASSA, PEDRO J 3433 CYPRESS POINT CIRCLE SAINT CLOUD, FL 34772 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 :

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	CABASSA, PEDRO J	Name	BELLO, NIXALIZ Y
Address	3433 CYPRESS POINT CIRCLE	Address	3433 CYPRESS POINT CIRCLE
City-State-Zip:	SAINT CLOUD FL 34772	City-State-Zip:	SAINT CLOUD FL 34772

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: PEDRO J CABASSA

MGR

03/31/2024

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Mar 31, 2024 Secretary of State 9672347898CC

Certificate of Status Desired: No