

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000013229

Entity Name: CASIOLA PAYMENTS LLC

Current Principal Place of Business:

6751 FORUM DR
230
ORLANDO, FL 32821

Current Mailing Address:

PO BOX 22414
ORLANDO, FL 32830

FEI Number: 87-4392393

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASIOLA LLC
6751 FORUM DRIVE
SUITE 230
ORLANDO, FL 32821 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 AMBR
Name GOEDHEID, DENNIS
Address PO BOX 22414
City-State-Zip: ORLANDO FL 32830

Title MGR
Name LESTER, MICHAEL A
Address PO BOX 22414
City-State-Zip: ORLANDO FL 32830

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: MICHAEL LESTER

CFO

02/21/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date