

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000470402

**Entity Name:** CLASIM2024 LLC

**Current Principal Place of Business:**

217 N WESTMONTE DR  
STE 2018  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

217 N WESTMONTE DR  
STE 2018  
ALTAMONTE SPRINGS, FL 32714 US

**FEI Number:** 37-1916392

**Certificate of Status Desired:** No

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

DANNEL, JOHN E  
217 N WESTMONTE DR  
2018  
ALTAMONTE SPRINGS, FL 32714 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            CORAL, CLAUDIO  
Address        217 N WESTMONTE DR, 2018  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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:** CLAUDIO CORAL

AMBR

02/27/2025

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

\_\_\_\_\_  
Date