

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000258169

Entity Name: CLAIM DEPOT, LLC

Current Principal Place of Business:

910 WEST AVE APT 800
MIAMI BEACH, FL 33139

Current Mailing Address:

910 WEST AVE APT 800
MIAMI BEACH, FL 33139 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GENDRON, WILLIAM
910 WEST AVE APT 800
MIAMI BEACH, FL 33139 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 GENDRON, WILLIAM
Address 910 WEST AVE APT 800
City-State-Zip: MIAMI BEACH FL 33139

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: WILLIAM GENDRON

AMBR

02/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date