

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000156174

**Entity Name:** 141 BLUE MOON TRIPLEX, LLC

**Current Principal Place of Business:**

6050 SW 116 STREET  
MIAMI, FL 33156

**Current Mailing Address:**

6050 SW 116 STREET  
PINECREST, FL 33156 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ADAM, GROCHOLSKI  
6050 SW 116 STREET  
MIAMI, FL 33156 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:** ADAM GROCHOLSKI

02/28/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           PRESIDENT  
Name           GROCHOLSKI, ADAM  
Address        6050 SW 116 STREET  
City-State-Zip: MIAMI FL 33156

*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:** ADAM GROCHOLSKI

PRESIDENT

02/28/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date