

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000439396

**Entity Name:** BLUE PALM SH1 LLC

**Current Principal Place of Business:**

30 N GOULD ST #30846  
SHERIDAN, WY 82801

**Current Mailing Address:**

30 N GOULD ST #30846  
SHERIDAN, WY 82801 US

**FEI Number:** 92-0688856

**Certificate of Status Desired:** No

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

WISMER, CHARLES A  
12321 EQUINE LANE  
WELLINGTON, FL 33414 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 MGR  
Name BLUE PALM PARTNERS LLC  
Address 30 N GOULD ST #30846  
City-State-Zip: SHERIDAN WY 82801

*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:** CHARLES WISMER

**MANAGER**

**04/01/2024**

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

\_\_\_\_\_  
Date