

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000442371

**Entity Name:** DOUBLE PALM LLC

**Current Principal Place of Business:**

2851 NE 183 ST  
508 E  
AVENTURA, FL 33160

**Current Mailing Address:**

2851 NE 183 ST  
508 E  
AVENTURA, FL 33160 US

**FEI Number:** 87-1112833

**Certificate of Status Desired:** Yes

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

BECERRA, FLORENCIA  
2851 NE 183 ST  
508 E  
HOLLYWOOD, FL 33160 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	Title	MGR
Name	BECERRA, FLORENCIA	Name	IRIBARREN, LUIS J
Address	2851 NE 183 ST 508 E	Address	2851 NE 183 ST 508 E
City-State-Zip:	AVENTURA FL 33160	City-State-Zip:	AVENTURA FL 33160

*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:** FLORENCIA BECERRA

**MGR**

**04/29/2024**

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

\_\_\_\_\_  
Date