

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000017313

**Entity Name:** BLUE CARIBE, LLC

**Current Principal Place of Business:**

1633 CHALLENGE AVE.  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

1633 CHALLENGE AVE.  
JACKSONVILLE, FL 32205 US

**FEI Number:** 59-3751341

**Certificate of Status Desired:** No

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

ROBERTS, CHAD S  
1633 CHALLENGE AVE.  
JACKSONVILLE, FL 32205 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 ROBERTS, CHAD S  
Address 1633 CHALLENGE AVE.  
City-State-Zip: JACKSONVILLE FL 32205

*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:** CHAD S ROBERTS

**AUTHORIZED MEMBER**

**04/01/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date