

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000006303

**Entity Name:** TRIPLE Y LLC

**Current Principal Place of Business:**

417 GOLDEN BEACH DRIVE  
GOLDEN BEACH, FL 33160

**Current Mailing Address:**

P.O. BOX 600318  
NORTH MIAMI BEACH, FL 33160

**FEI Number:** 35-2581160

**Certificate of Status Desired:** No

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

PARRINO, ROCHELLE  
417 GOLDEN BEACH DRIVE  
GOLDEN BEACH, 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            CEO  
Name            PARRINO, ROCHELLE  
Address        P.O. BOX 600318  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            CFO  
Name            PARRINO, ANGELO RAYMOND  
Address        P.O. BOX 600318  
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title            COO  
Name            PARRINO, AVI SETH  
Address        P.O. BOX 600318  
City-State-Zip: NORTH MIAMI BEACH 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:** ROCHELLE PARRINO

CEO

02/06/2022

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

\_\_\_\_\_ Date