

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000461400

**Entity Name:** 1140 AVE D LLC

**Current Principal Place of Business:**

1860 SW FOUNTAINVIEW BLVD  
SUITE 100  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

1860 SW FOUNTAINVIEW BLVD  
SUITE 100  
PORT ST LUCIE, FL 34986 US

**FEI Number:** 99-2545685

**Certificate of Status Desired:** No

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

GENESIS LAW, PA  
1860 SW FOUNTAINVIEW BLVD  
SUITE 100  
PORT ST LUCIE, FL 34986 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 DANIEL, ALECIA C  
Address 1860 SW FOUNTAINVIEW BLVD  
SUITE 100  
City-State-Zip: PORT ST LUCIE FL 34986

Title MBR  
Name TWELVE ONE LLC  
Address 30 N GOULD ST  
ST R  
City-State-Zip: SHERIDAN WY 82801

Title MBR  
Name ALECIA C DANIEL LLC  
Address 1860 SW FOUNTAINVIEW BLVD  
SUITE 100  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** ALECIA C DANIEL

**MANAGER**

**04/17/2024**

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