

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000102294

**Entity Name:** C.S.S. LLC.

**Current Principal Place of Business:**

22 E JOHNSON AVE.  
PENSACOLA, FL 32534

**Current Mailing Address:**

22 E JOHNSON AVE.  
PENSACOLA, FL 32534

**FEI Number:** 20-8917194

**Certificate of Status Desired:** No

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

JAY, SHEPPARD  
8550 JADE ACRES RD  
PENSACOLA, FL 32526 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:** JAY A SHEPPARD

04/15/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SHEPPARD, JAY A  
Address 22 E JOHNSON AVE  
City-State-Zip: PENSACOLA FL 32534

*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:** JAY SHEPPARD

MMBR

04/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date