# DOCUMENT# L13000083111

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: NORTHEAST FLORIDA SPECIALTIES, LLC

## Current Principal Place of Business:

45200 DORMAN PLACE CALLAHAN, FL 32011

# **Current Mailing Address:**

45200 DORMAN PLACE CALLAHAN, FL 32011 US

## FEI Number: 80-0935886

## Name and Address of Current Registered Agent:

MIZELL, WALTER S 45200 DORMAN PLACE CALLAHAN, FL 32011 US Secretary of State CC4093958371

FILED Sep 09, 2014

Certificate of Status Desired: No

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

# Authorized Person(s) Detail :

Title		MGR	Title	MGR
Nam	e	MIZELL, WALTER S	Name	MIZELL, DENISE D
Addr	ess	45200 DORMAN PLACE	Address	45200 DORMAN PLACE
City-	State-Zip:	CALLAHAN FL 32011	City-State-Zip:	CALLAHAN FL 32011
Title		MGR		
Title Nam	е	MGR MIZELL, DEVIN S		
Nam Addr		MIZELL, DEVIN S		

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: WALTER S. MIZELL

MANAGER

Date

Electronic Signature of Signing Authorized Person(s) Detail