

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000319713

**Entity Name:** YOUR EVENT SPECIALISTS LLC**Current Principal Place of Business:**11908 CARSON LAKE DR W  
JACKSONVILLE, FL 32221**Current Mailing Address:**11908 CARSON LAKE DR W  
JACKSONVILLE, FL 32221 US**FEI Number:** 85-3618755**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SANDERS, JESSICA  
11908 CARSON LAKE DR W  
JACKSONVILLE, FL 32221 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	SANDERS, JESSICA
Address	11908 CARSON LAKE DR W
City-State-Zip:	JACKSONVILLE FL 32221

Title	AMBR
Name	BYRD, VERONICA
Address	11908 CARSON LAKE DR W
City-State-Zip:	JACKSONVILLE FL 32221

Title	AMBR
Name	SANDERS, CALVIN
Address	11908 CARSON LAKE DR W
City-State-Zip:	JACKSONVILLE FL 32221

*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:** JESSICA SANDERS

OWNER

04/10/2023

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