

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000214535

**Entity Name:** CB'S SPECIALITIES LLC

**Current Principal Place of Business:**

17721 GALVESTON ST  
SPRING HILL, FL 34610

**Current Mailing Address:**

17721 GALVESTON ST  
SPRING HILL, FL 34610 US

**FEI Number:** 88-2378672

**Certificate of Status Desired:** No

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

CARLA BARBER  
17721 GALVESTON ST  
SPRING HILL, FL 34610 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	Title	AMBR
Name	CARLA BARBER	Name	LOGAN BARBER
Address	17721 GALVESTON ST	Address	17721 GALVESTON ST
City-State-Zip:	SPRING HILL FL 34610	City-State-Zip:	SPRING HILL FL 34610

*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:** CARLA D BARBER

**OWNER**

**04/26/2024**

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

\_\_\_\_\_  
Date