

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000090622

**Entity Name:** SPECIALTY CARTZ & PARTZ LLC

**Current Principal Place of Business:**

1880-2 DUNN AVENUE  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

1880-2 DUNN AVENUE  
JACKSONVILLE, FL 32218

**FEI Number:** 01-0843720

**Certificate of Status Desired:** No

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

ALLISON, RICHARD L  
11074 OLD KINGS ROAD  
JACKSONVILLE, FL 32219 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 ALLISON, RICHARD L  
Address 11074 OLD KINGS ROAD  
City-State-Zip: JACKSONVILLE FL 32219

*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:** RICHARD L ALLISON

MANAGER

03/01/2023

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

\_\_\_\_\_ Date