

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L25000058303

**Entity Name:** MERPZ LLC

**Current Principal Place of Business:**

6611 SOUTHPOINT PKWY  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

6611 SOUTHPOINT PKWY  
JACKSONVILLE, FL 32216 US

**FEI Number:** 33-3680815

**Certificate of Status Desired:** No

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

POWELL, JARED E  
903 17TH ST N  
JACKSONVILLE BEACH, FL 32250 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 GRAVES, ZOE  
Address 637 NATURELAND CIRCLE  
City-State-Zip: ST. AUGUSTINE FL 32092

*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:** ZOE GRAVES

MANAGER

05/01/2026

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

\_\_\_\_\_ Date