

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000006929

**Entity Name:** CETERA FINANCIAL SPECIALISTS SERVICES LLC**Current Principal Place of Business:**1450 AMERICAN LANE,  
STE 650  
SCHAUMBURG, IL 60173**Current Mailing Address:**2301 ROSECRANS AVE  
STE 5100  
EL SEGUNDO, CA 90245 US**FEI Number:** 36-3287737**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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	OTHER
Name	CHAFFIN, GARY
Address	2301 ROSECRANS AVE STE 5100
City-State-Zip:	EL SEGUNDO CA 90245

Title	MANAGER, VP
Name	NEARY, JOSEPH
Address	2301 ROSECRANS AVE STE 5100
City-State-Zip:	EL SEGUNDO CA 90245

Title	MANAGER
Name	GOOLEY, THOMAS
Address	2301 ROSECRANS AVE STE 5100
City-State-Zip:	EL SEGUNDO CA 90245

Title	MANAGER
Name	TAYLOR, THOMAS
Address	2301 ROSECRANS AVE STE 5100
City-State-Zip:	EL SEGUNDO CA 90245

Title	ASST. SECRETARY
Name	DAVID, VAN HAVERMAAT
Address	2301 ROSECRANS AVE STE 5100
City-State-Zip:	EL SEGUNDO CA 90245

*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:** GARY CHAFFIN**TAX OFFICER****03/29/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date