

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000518439

**Entity Name:** CAR KEY REPLACEMENT JACKSONVILLE LLC

**Current Principal Place of Business:**

6010 DU-CLAY RD  
SUITE 5  
JACKSONVILLE, FL 32244

**Current Mailing Address:**

6010 DU-CLAY RD  
SUITE 5  
JACKSONVILLE, FL 32244 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MIZRAHI, ROTEM  
6010 DU-CLAY RD  
SUITE 5  
JACKSONVILLE, FL 32244 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 MIZRAHI, ROTEM  
Address 6010 DU-CLAY RD, SUITE 5  
City-State-Zip: JACKSONVILLE FL 32244

*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:** ROTEM MIZRAHI

MGR

02/06/2024

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

\_\_\_\_\_  
Date