

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000160022

**Entity Name:** MTZI SERVICES LLC

**Current Principal Place of Business:**

2184 SE WASHINGTON ST N  
STUART, FL 34997

**Current Mailing Address:**

2184 SE WASHINGTON ST N  
STUART, FL 34997 US

**FEI Number:** 86-3335005

**Certificate of Status Desired:** Yes

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

TREASURE COAST NOTARY & MULTI SERVICES LLC  
2184 SE WASHINGTON ST N  
STUART, FL 34997 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, AUTHORIZED MEMBER  
Name MARTINEZ RIVERA, ISMAEL  
Address 2184 SE WASHINGTON ST N  
City-State-Zip: STUART FL 34997

Title AMBR, AUTHORIZED MEMBER  
Name MARTINEZ SANCHEZ, ISMAEL  
Address 2184 SE WASHINGTON ST N  
City-State-Zip: STUART FL 34997

Title AMBR, MANAGER  
Name HERNANDEZ, LORENA  
Address 2184 SE WASHINGTON ST N  
City-State-Zip: STUART FL 34997

Title AMBR, AUTHORIZED MEMBER  
Name FERNANDEZ, JOANNA  
Address 2184 SE WASHINGTON ST N  
City-State-Zip: STUART FL 34997

*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:** JOANNA FERNANDEZ

AMBR

04/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date