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COVER LETTER

FO: Registration Section Division of Corporations		
SUBJECT: MTVauis Soli Name of Limited	whons, LLC	
Name of Limited	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Michael Edwin Trav	is andor	
Kathken Ann Travis	<u>S</u>	
MTVavis Solutions, Firm/Company	LLC	
45 Anastasia Grde Address		
Inlet Beach, FL 32461 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Kathleen Travis at (77 Name of Person	O 365-5419 Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	
INHS18 (2/14)	il i	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Rursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: MTravis Solutions,	
2. (a) (b)	
Principal office address of limited liability company: Mailing address of	limited liability company: POST OFFICE BOX)
45 Anastasia Circle 45 Anas	trsia arde
Inlet Beach, FL 32461 Inlet B	each, FL 32
Feb 28, 2024 L23000	236937
3. Date of filing/registration in Florida 4. Document num	ber
5. (a) United States Corp. Agents, The Registered Agent and Registered Office shown on the record of the Florida Dept. of State:	ı
476 Riverside Ave	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	. 2
	.024 .5EC
Jacksonville , FL 32202	APR
(b) Kathleen Ann Travis	() 15
Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	3. 1.
NEW Registered Office Address:	. •
45 Anastasia Civile	
Inlet Beach, FL 32461	
If the limited liability company is not organized under the laws of the State of Florida, it is hereb	v confirmed that after the
change or changes are made, the Florida street address of the registered office and the business of agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirm	ffice of the registered
was/were authorized by an affirmative vote of the members of the limited liability company or as the articles of organization or the operating agreement of the limited liability company.	otherwise provided in
Kathleen	Ann Travis
Signature of a member or authorized representative of a member Printed or typed n I hereby accept the appointment as registered agent and agree to act in this capacity. I further of	ll -
provisions of all statutes relative to the proper and complete performance of my duties, and I am the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this to merely reflect a change in the registered office address, I hereby confirm that the limited liabil	Tamiliar with and accept
notified in writing of this change.	ity company has been
Signature of Registered Agent	