# 2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A9500000051

Entity Name: MITIGATION SOLUTIONS, LTD.

### **Current Principal Place of Business:**

542 S. EDGEWOOD AVE. **STE 200** JACKSONVILLE, FL 32205

## **Current Mailing Address:**

4530-15 ST JOHNS AVE #408 JACKSONVILLE, FL 32210 US

### FEI Number: 59-3296069

### Name and Address of Current Registered Agent:

ALLEN, LAURA HENRY 4530-15 ST JOHNS AVE #408 JACKSONVILLE, FL 32210 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: LAURA HENRY ALLEN

Electronic Signature of Registered Agent

### **General Partner Detail :**

P94000013173 Document # MITIGATION SOLUTIONS, INC. Name 4530-15 ST JOHNS AVE Address #408 City-State-Zip: JACKSONVILLE FL 32210

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA HENRY ALLEN

Electronic Signature of Signing General Partner Detail

Certificate of Status Desired: No

02/08/2023 Date

02/08/2023

Date

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