

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000167747

**Entity Name:** CSB SOLUTIONS LLC

**Current Principal Place of Business:**

620 MEME LN  
VALRICO, FL 33594

**Current Mailing Address:**

620 MEME LN  
VALRICO, FL 33594

**FEI Number:** 82-2448886

**Certificate of Status Desired:** No

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

BRAVIS, CHARLES S  
620 MEME LN  
VALRICO, FL 33594 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 BRAVIS, CHARLES S  
Address 620 MEME LN  
City-State-Zip: VARRICO FL 33594

*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:** CHARLES BRAVIS

**MANAGER**

**03/05/2024**

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

\_\_\_\_\_  
Date