

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000120834

**Entity Name:** MGT INTERMEDIATE, LLC

**Current Principal Place of Business:**

4320 W. KENNEDY BLVD., SUITE 200  
TAMPA, FL 33609

**Current Mailing Address:**

4320 W. KENNEDY BLVD., SUITE 200  
TAMPA, FL 33609 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE IRLAND ROAD  
PLANTATION, FL 33324 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	Title	MGR
Name	TRAVIESA, ANTHONY TREY	Name	CARLA LUKE
Address	4320 W. KENNEDY BLVD., SUITE 200	Address	4320 W. KENNEDY BLVD., SUITE 200
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609

*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:** ANTHONY TREY TRAVIESA

**MANAGER**

**03/27/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date