

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000369778

**Entity Name:** LCG MATI, LLC

**Current Principal Place of Business:**

201 E. KENNEDY BLVD.  
STE. 1700  
TAMPA, FL 33602

**Current Mailing Address:**

201 E. KENNEDY BLVD.  
STE. 1700  
TAMPA, FL 33602 US

**FEI Number:** 88-3908307

**Certificate of Status Desired:** No

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

LCG FINANCIAL SERVICES, LLC  
201 E. KENNEDY BLVD.  
STE. 1700  
TAMPA, FL 33602 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 NIX, CHRISTOPHER G  
Address 201 E. KENNEDY BLVD., STE. 1700  
City-State-Zip: TAMPA FL 33602

Title MGR  
Name SMITH, BRIAN M  
Address 201 E. KENNEDY BLVD., STE. 1700  
City-State-Zip: TAMPA FL 33602

Title MGR  
Name EPSTEIN, PAUL I  
Address 201 E. KENNEDY BLVD., STE. 1700  
City-State-Zip: TAMPA FL 33602

Title MGR  
Name DIXON, SCOTT  
Address 201 E. KENNEDY BLVD., STE. 1700  
City-State-Zip: TAMPA FL 33602

*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:** CHRISTOPHER NIX

**MEMBER**

**04/13/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date