

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000236937

**Entity Name:** MTRAVIS SOLUTIONS LLC

**Current Principal Place of Business:**

45 ANASTASIA CIRCLE  
INLET BEACH, FL 32461

**Current Mailing Address:**

45 ANASTASIA CIRCLE  
INLET BEACH, FL 32461 US

**FEI Number:** 93-1364196

**Certificate of Status Desired:** Yes

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

UNITED STATES CORPORATION AGENTS, INC.  
45 ANASTASIA CIRCLE  
INLET BEACH, FL 32461 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            AMBR  
Name            TRAVIS, MICHAEL E  
Address        45 ANASTASIA CIRCLE  
City-State-Zip: INLET BEACH FL 32461

Title            AMBR  
Name            TRAVIS, KATHLEEN A  
Address        45 ANASTASIA CIRCLE  
City-State-Zip: INLET BEACH FL 32461

*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:** KATHLEEN TRAVIS

**PARTNER**

**02/28/2024**

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

\_\_\_\_\_  
Date