

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000864

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** FISERV FULFILLMENT AGENCY, LLC

**Current Principal Place of Business:**

C/O FISERV LENDING SOLUTIONS  
31 INWOOD RD.  
ROCKY HILL, CT 06067

**New Principal Place of Business:**

600A JOHN RODES BLVD  
MELBOURNE, FL 32934

**Current Mailing Address:**

C/O FISERV LENDING SOLUTIONS  
31 INWOOD RD.  
ROCKY HILL, CT 06067

**New Mailing Address:**

C/O FISERV FULFILLMENT SERVICES, INC.  
31 INWOOD RD.  
ROCKY HILL, CT 06067

FEI Number: 59-3720558

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HOWLETT III, LESLIE J  
Address: 31 INWOOD RD  
City-St-Zip: ROCKY HILL, CT 06067

Title: MGR  
Name: LONDON, IRA J  
Address: 600A JOHN RODES BLVD  
City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: LESLIE J HOWLETT III

MGRM

01/06/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date