

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000864

FILED  
Jan 13, 2011  
Secretary of State

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

**Current Principal Place of Business:**

600A JOHN RODES BLVD  
MELBOURNE, FL 32934

**New Principal Place of Business:**

3220 TILLMAN DRIVE  
SUITE 301  
BENSALEM, PA 19020

**Current Mailing Address:**

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

**New Mailing Address:**

3220 TILLMAN DRIVE  
SUITE 301  
BENSALEM, PA 19020

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: MGR  
Name: ISGN FULFILLMENT SERVICES INC  
Address: 3220 TILLMAN DRIVE, SUITE 301  
City-St-Zip: BENSALEM, PA 19020

Title: MGRM  
Name: PATEL, CHETAN  
Address: 3220 TILLMAN DRIVE, SUITE 301  
City-St-Zip: BENSALEM, PA 19020

Title: MGRM  
Name: MATKOV, CAROLYN  
Address: 3220 TILLMAN DRIVE, SUITE 301  
City-St-Zip: BENSALEM, PA 19020

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: CAROLYN MATKOV

MGRM

01/13/2011

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