

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114966

Entity Name: PAY-PLUS LLC

Current Principal Place of Business:

13059 W LINEBAUGH AVE
101
TAMPA, FL 33626

Current Mailing Address:

13059 W LINEBAUGH AVE
101
TAMPA, FL 33626

FEI Number: 26-3891378

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CATES, ALTON KJR.
13059 W LINEBAUGH AVE
102
TAMPA, FL 33626 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 MGRM
Name CATES, ALTON KJR
Address 12904 TAR FLOWER DR
City-State-Zip: TAMPA FL 33626

Title MGRM
Name GOLDBERG, KIMBERLY C
Address 2842 SHERRY BROOK LN
City-State-Zip: LUTZ FL 33559

Title MGRM
Name SCHEIDTER, JULIE H
Address 11908 MARBLEHEAD DR
City-State-Zip: TAMPA FL 33626

Title MGRM
Name FELIX BLANCO CPA PA
Address 13059 W LINEBAUGH AVE STE 102
City-State-Zip: TAMPA FL 33626

Title MGRM
Name HOLLENBACK, NICHOLE
Address 655 APPALOOSA RD
City-State-Zip: TARPON SPRINGS FL 34688

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: ALTON K CATES JR

MANAGING MEMBER

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date