

2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000103237

Entity Name: PAYSMART USA, LLC**Current Principal Place of Business:**100 COLONIAL CENTER PARKWAY, #140
LAKE MARY, FL 32746-4768**Current Mailing Address:**100 COLONIAL CENTER PARKWAY, #140
LAKE MARY, FL 32746-4768**FEI Number:** 20-3973860**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES, FRANK T
100 COLONIAL CENTER PKWY
SUITE 140
LAKE MARY, FL 32746 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 ELMER, CHRISTOPHER A
Address 100 COLONIAL CENTER PARKWAY,
#140
City-State-Zip: LAKE MARY FL 32746-4768

Title PRESIDENT
Name JONES, FRANK T
Address 100 COLONIAL CENTER PARKWAY,
#140
City-State-Zip: LAKE MARY FL 32746-4768

Title TREASURER
Name FERGUSON, MELISSA D
Address 100 COLONIAL CENTER PARKWAY,
#140
City-State-Zip: LAKE MARY FL 32746-4768

Title MGR
Name BAKER, DODI
Address 100 COLONIAL CENTER PARKWAY,
#140
City-State-Zip: LAKE MARY FL 32746-4768

Title VP
Name JENKINS, ROBIN E
Address 100 COLONIAL CENTER PARKWAY,
#140
City-State-Zip: LAKE MARY FL 32746-4768

Title SECRETARY
Name MALLORY, ANGELA R
Address 100 COLONIAL CENTER PARKWAY,
#140
City-State-Zip: LAKE MARY FL 32746-4768

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK JONES

PRESIDENT

04/03/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date