

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000103423

**Entity Name:** LEFKO PAYMENTS SOLUTIONS LLC

**Current Principal Place of Business:**

1395 BRICKELL AVE STE 800  
MIAMI, FL 33131

**Current Mailing Address:**

1395 BRICKELL AVE STE 800  
MIAMI, FL 33131 US

**FEI Number:** 37-1699287

**Certificate of Status Desired:** No

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

PEREZ, JOSE  
7325 NW 36TH ST  
MIAMI, FL 33166 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 GUZMAN LENCINA, CRISTIAN  
Address 1395 BRICKELL AVE STE 800  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name BRUN PEREZ, BEATRIZ  
Address 1395 BRICKELL AVE STE 800  
City-State-Zip: MIAMI FL 33131

*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:** GUZMAN LENCINA , CRISTIAN

MGRM

04/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date