

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000110771

**Entity Name:** LIMITLESS PAYMENTS LLC

**Current Principal Place of Business:**

7901 4TH STREET N  
STE 300  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

2222 W. GRAND RIVER AVE  
STE A  
OKEMOS, MI 48864 US

**FEI Number:** 84-3482183

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH STREET N  
STE 300  
ST. PETERSBURG, FL 33702 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:** BILL HAVRE

04/04/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name EMBLAZE ONE INC.  
Address 7901 4TH STREET N  
STE 300  
City-State-Zip: ST. PETERSBURG FL 33702

*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:** UNDEFINED UNDEFINED

AUTHORIZED MEMBER

04/04/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date