# 2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M0400003948

Entity Name: ALLIED CASH HOLDINGS LLC

### **Current Principal Place of Business:**

7755 MONTGOMERY ROAD SUITE 400 CINCINNATI, OH 45236

# **Current Mailing Address:**

7755 MONTGOMERY ROAD SUITE 400 CINCINNATI, OH 45236 US

# FEI Number: 94-3391147

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

# Authorized Person(s) Detail :

Title	MEMBER	Title	MEMBER
Name	DAVIS, A DAVID	Name	ANDRE, ANDREA
Address	7755 MONTGOMERY ROAD SUITE 400	Address	7755 MONTGOMERY ROAD SUITE 400
City-State-Zip:	CINCINNATI OH 45236	City-State-Zip:	CINCINNATI OH 45236
Title	MEMBER	Title	MEMBER
Name	CLARK, DOUGLAS D	Name	JOSEFORSKY, JULIE
Address	7755 MONTGOMERY ROAD SUITE 400	Address	7755 MONTGOMERY ROAD SUITE 400
City-State-Zip:	CINCINNATI OH 45236	City-State-Zip:	CINCINNATI OH 45236
Title	MEMBER	Title	MEMBER
Name	JUDD, KENNETH	Name	WILLIAMSON, LUKE
Address	7755 MONTGOMERY ROAD SUITE 400	Address	7755 MONTGOMERY ROAD SUITE 400
City-State-Zip:	CINCINNATI OH 45236	City-State-Zip:	CINCINNATI OH 45236

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: ANDREA ANDRE

MEMBER

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

Date