

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003948

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

Certificate of Status Desired: No

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

Date

Authorized Person(s) Detail :

Title	MEMBER, DIRECTOR	Title	MEMBER, SECRETARY
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, DIRECTOR, PRESIDENT	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, CFO	Title	MEMBER, TREASURER
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

SECRETARY

04/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date