# Entity Name: MERCHANTS' CHOICE PAYMENT SOLUTIONS OF FLORIDA, LLC

2019 FOREIGN LIMITED LIABILITY COMPANY REINSTATEMENT

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

8250 BRYAN DAIRY RD SUITE 100 LARGO, FL 33777

## **Current Mailing Address:**

DOCUMENT# M11000005586

3500 DE MAISONNEUVE WEST SUITE 700 MONTREAL, QUEBEC H3Z 3C1 CA

## FEI Number: 45-3622694

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

#### CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	SARAH REVELLE			02/27/2019
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	PRESIDENT	Title	VP	
Name	DANIEL, CHAZONOFF MR.	Name	LINDEN, TODD MR.	
Address	3500 DE MAISONNEUVE WEST	Address	7803 FAIRWAY COVE CT	
City-State-Zip:	SUITE 700 MONTREAL QUEBEC H3Z 3C1	City-State-Zip:	SPRING TX 77389	
Title	SECRETARY			
Name	LEWIN, DOUG MR.			
Address	3500 DE MAISONNEUVE WEST SUITE 700			
City-State-Zip:	MONTREAL QUEBEC H3Z 3C1			

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: DOUG LEWIN

SECRETARY

02/27/2019 Date

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 27, 2019 Secretary of State 5869244048CR

Certificate of Status Desired: No