2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000001189

Entity Name: PAYCARGO, LLC

Current Principal Place of Business:

201 ALHAMBRA CIRCLE SUITE 711

CORAL GABLES, FL 33134

Current Mailing Address:

201 ALHAMBRA CIRCLE

SUITE 711

CORAL GABLES, FL 33134 US

FEI Number: 26-3699697 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 01, 2024

Secretary of State

7588273697CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

Name RIEGO, EDUARDO DEL Name BAXT, MITCHELL

Address 201 ALHAMBRA CIRCLE Address 201 ALHAMBRA CIRCLE

SUITE 711 SUITE 711

CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MANAGER Title MANAGER

Name BRANDT, LARRY Name TICE, KEVIN

Address 201 ALHAMBRA CIRCLE Address 201 ALHAMBRA CIRCLE

SUITE 711 SUITE 711

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

 Title
 MANAGER
 Title
 MANAGER

 Name
 HARVEY, STUART
 Name
 HINKLE, RYAN

Address 201 ALHAMBRA CIRCLE Address 201 ALHAMBRA CIRCLE

SUITE 711 SUITE 711

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MANAGER Title MANAGER

Name LOCKHART, GENE Name MULLEN, ADMIRAL MICHAEL

Address 201 ALHAMBRA CIRCLE Address 201 ALHAMBRA CIRCLE

SUITE 711 SUITE 711

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Continues on page 2

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: MAYTE CABADA GENERAL COUNSEL 04/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

GENERAL COUNSEL Title Name CABADA, MAYTE

201 ALHAMBRA CIRCLE SUITE 711 Address

City-State-Zip: CORAL GABLES FL 33134