2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000000474

Entity Name: JPAY LLC

Current Principal Place of Business:

3450 LAKESIDE DRIVE

SUITE 100

MIRAMAR, FL 33027

Current Mailing Address:

C/O PLATINUM EQUITY ADVISORS, LLC

360 NORTH CRESCENT DRIVE SOUTH BUILDING

BEVERLY HILLS, CA 90210 US

FEI Number: 01-0756761 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEVERLY HILLS CA 90210

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:

Title

City-State-Zip:

FILED Feb 27, 2024

Secretary of State

1668790417CC

Date

BEVERLY HILLS CA 90210

Authorized Person(s) Detail:

LLC

LLC

11C

Title **MANAGER** Title VΡ

Electronic Signature of Registered Agent

Name SIGLER, MARY ANN Name SIGLER, MARY ANN

Address C/O PLATINUM EQUITY ADVISORS, Address C/O PLATINUM EQUITY ADVISORS,

LLC

360 NORTH CRESCENT DRIVE 360 NORTH CRESCENT DRIVE

SOUTH BUILDING SOUTH BUILDING

TREASURER Title Title VP

KALAWSKI, EVA MONICA SIGLER, MARY ANN Name Name

Address C/O PLATINUM EQUITY ADVISORS, Address C/O PLATINUM EQUITY ADVISORS,

LLC

360 NORTH CRESCENT DRIVE 360 NORTH CRESCENT DRIVE

SOUTH BUILDING SOUTH BUILDING

BEVERLY HILLS CA 90210 City-State-Zip: BEVERLY HILLS CA 90210 City-State-Zip:

Title SECRETARY Title COMPLIANCE OFFICER

Name KALAWSKI, EVA MONICA Name THATCH, APRYL

Address C/O PLATINUM EQUITY ADVISORS, Address 3450 LAKESIDE DRIVE

> SUITE 100 360 NORTH CRESCENT DRIVE

City-State-Zip: MIRAMAR FL 33027 SOUTH BUILDING

BEVERLY HILLS CA 90210 City-State-Zip: Title CHIEF PAYMENTS COMPLIANCE

> OFFICER CHIEF INFORMATION SECURITY

Name CHEEMA, MURTAZA **OFFICER**

Address 3450 LAKESIDE DRIVE COOPER-LEAVITT, JERAMY Name

SUITE 100

Address 3450 LAKESIDE DRIVE MIRAMAR FL 33027 City-State-Zip: SUITE 100

City-State-Zip: MIRAMAR FL 33027

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.

Continues on page 2

02/27/2024 SIGNATURE: MARY ANN SIGLER MANAGER

Authorized Person(s) Detail Continued:

PHILLIPS, CRAIG

Name

 Title
 CEO
 Title
 PRESIDENT

 Name
 ABEL, DAVID
 Name
 ELDER, KEVIN

Address 3450 LAKESIDE DRIVE Address 3450 LAKESIDE DRIVE

SUITE 100 SUITE 100

City-State-Zip: MIRAMAR FL 33027 City-State-Zip: MIRAMAR FL 33027

Title CFO Title CHIEF INFORMATION OFFICER

Name

SANKARAN, MELANIE

Address 3450 LAKESIDE DRIVE Address 3450 LAKESIDE DRIVE

SUITE 100 SUITE 100

City-State-Zip: MIRAMAR FL 33027 City-State-Zip: MIRAMAR FL 33027