

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000016215

Entity Name: ZELIS PAYMENTS , LLC**Current Principal Place of Business:**570 CARILLON PKWY STE 500
ST PETERSBURG, FL 33716**Current Mailing Address:**2 CROSSROADS DR
BEDMINSTER, NJ 07921**FEI Number:** 45-2579291**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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	CEO
Name	EISEL, AMANDA
Address	2 CROSSROADS DRIVE
City-State-Zip:	BEDMINSTER NJ 07921
Title	EXECUTIVE VP, CHIEF LEGAL OFFICER, CHIEF COMPLIANCE OFFICER AND SECRETARY
Name	O'TOOLE MAHONEY, MARY
Address	2 CROSSROADS DR
City-State-Zip:	BEDMINSTER NJ 07921
Title	CHIEF PRIVACY OFFICER AND ASSISTANT SECRETARY
Name	ZOLFO, ANTHONY
Address	2 CROSSROADS DRIVE
City-State-Zip:	BEDMINSTER NJ 07921

Title	CFO
Name	GLADDEN, BRIAN
Address	2 CROSSROADS DRIVE
City-State-Zip:	BEDMINSTER NJ 07921
Title	ASST. SECRETARY
Name	PERL, JESSICA
Address	2 CROSSROADS DRIVE
City-State-Zip:	BEDMINSTER NJ 07921
Title	SCARATARY
Name	, MARY O'TOOLE, MAHONEY
Address	570 CARILLON PKWY STE 500
City-State-Zip:	ST PETERSBURG FL 33716

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: MARY O'TOOLE MAHONEY

SCARTARY

02/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date