2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L02000004712

1. Entity Name

EMPLOYEE CASH MANAGEMENT, LLC



Principal Place of Business

250 WILLIAMS ST

M-100

ATLANTA, GA 30303 U

Mailing Address

250 WILLIAMS ST

M-100

ATLANTA, GA 30303 US

FILED Mar 20, 2008 08:00 A Secretary of State



02122008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For	
NOT APPLICABLE		Not Applicable
- 0 46 + 40 + 5 + 4	\$	5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

C.T. CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

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	the obligations of registered agent.		•	
ŞIÇ	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)		DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SMITH, M. BROOKS 250 WILLIAMS ST M-100 ATLANTA, GA 30303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO TAYLOR, KENNETH 250 WILLIAMS ST M-100 ATLANTA, GA 30303
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/10/08

Daytime Phone #