

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008105

Entity Name: PAYTN, LLC

FILED  
Mar 16, 2009  
Secretary of State

**Current Principal Place of Business:**

6704 KESTREL CIR  
FORT MYERS, FL 33966

**New Principal Place of Business:**

6704 KESTREL CIR  
FORT MYERS, FL 33912 US

**Current Mailing Address:**

6704 KESTREL CIR  
FORT MYERS, FL 33966

**New Mailing Address:**

6704 KESTREL CIR  
FORT MYERS, FL 33912 US

FEI Number: 34-1391952

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MOWRY, MICHAEL  
6704 KESTREL CIR  
FORT MYERS, FL 33966 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MOWRY, MICHAEL  
Address: 6704 KESTREL CIRCLE  
City-St-Zip: FT. MYERS, FL 33966

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MOWRY, MICHAEL MGR  
Address: 6704 KESTREL CIRCLE  
City-St-Zip: FT. MYERS, FL 33912 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MICHAEL MOWRY

MGR

03/16/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date