2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007942

City-St-Zip: PARKLAND, FL 33076 US

Entity Name: FRANCHISE PAYMENTS NETWORK, LLC

FILED Jul 25, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
	YON LAKE CI), FL 32835	RCLE US				
Current Mailing Address:				New Mailing Address:		
	YON LAKE CI), FL 32835	RCLE US				
	: 20-4216648 ce with s. 607.19	FEI Number A 93(2)(b), F.S., the	pplied For() FEI Nu limited liability company did	mber Not Appl not receive th		Certificate of Status Desired () ice.
Name and	Address of	Current Regist	ered Agent:	Name and	Address	of New Registered Agent:
ORLANDO The above in the State	YON LAKE CI), FL 32835 named entity e of Florida.	US	atement for the purpose (of changing i	ts register	red office or registered agent, or both
SIGNATUF		nio Signaturo of	Degistered Agent			 Date
Electronic Signature of Registered Agent MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	EPSTEIN, THO	LAKE CIRCLE		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	FISHMAN, BRA	LAKE CIRCLE		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address:	MGMR (DRYSDALE, IA 6600 NW 95 L			Title: Name: Address:		(X) Change()Addition iTON, THOMAS JRCH CREEK LANE

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.

City-St-Zip: EDGEWATER, MD 21037 US

SIGNATURE: THOMAS EPSTEIN MM 07/25/2008