## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000041871

**Current Principal Place of Business:** 

Entity Name: EZPROCESS, LLC

FILED Feb 01, 2009 Secretary of State

10649 SW STRATTON DRIVE PORT SAINT LUCIE, FL 34987 **Current Mailing Address: New Mailing Address:** 10649 SW STRATTON DRIVE PORT SAINT LUCIE, FL 34987 FEI Number: 74-3213594 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VARGAS, ERICA 10649 SW STRATTON DRIVE PORT SAINT LUCIE, FL 34987 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:

## MANAGING MEMBERS/MANAGERS:

itle: MGR () Delete

Name: VARGAS, ERICA Address: 10649 SW STRATTON DRIVE

Electronic Signature of Registered Agent

City-St-Zip: PORT SAINT LUCIE, FL 34987

 Title:
 MGR
 (X) Delete

 Name:
 VARGAS, KELVIN

 Address:
 10649 STRATTON DRIVE

 City-St-Zip:
 PORT SAINT LUCIE, FL 34987

ADDITIONS/CHANGES:

**New Principal Place of Business:** 

( ) Change ( ) Addition

Date

() Change () Addition

Title: Name:

Name: Address: City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

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: ERICA VARGAS MGR 02/01/2009