

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000123846

FILED
May 01, 2009
Secretary of State

Entity Name: CU MERCHANT SERVICES, LLC

Current Principal Place of Business:

11600 NW 34 STREET
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

11600 NW 34 STREET
MIAMI, FL 33178

New Mailing Address:

FEI Number: 26-1568849 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

HALPERIN, MURRAY
3700 LAKESIDE DRIVE
4TH FLOOR
MIRAMAR, FL 33027 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: MURRAY HALPERIN

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BLACKSTONE MERCHANT SERVICES, INC.
Address: 11600 NW 34 STREET
City-St-Zip: MIAMI, FL 33178

Title: MGR () Delete
Name: CU BUSINESS CAPITAL, LLC
Address: 3700 LAKESIDE DRIVE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: MURRAY HALPERIN

MGR

05/01/2009

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