2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2011
Secretary of State

DOCUMENT# L10000034638

Entity Name: PROSPAY SECURE AND PAY, LLC

Current Principal Place of Business:

6355 NW 36 ST SUITE 202
VIRGINIA GARDENS, FL 33166

New Principal Place of Business:

Current Mailing Address:

6355 NW 36 ST SUITE 202
VIRGINIA GARDENS, FL 33166

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVAREZ, ORLANDO
6355 NW 36 ST SUITE 202
VIRGINIA GARDENS, FL 33166 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: MGRM
Name: ALVAREZ, ORLANDO
Address: 15386 SW 25 TERRITE 202
City-St-Zip: MIAMI, FL 33185

I hereby 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 Statues.

SIGNATURE: ORLANDO ALVAREZ MGRM 01/10/2011

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