

213 000 168 989

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

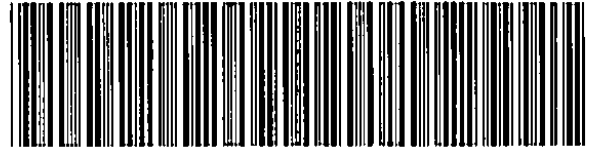
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 07 2020

ALBRITTON

TO: Registration Section
Division of Corporations

SUBJECT: 1ST PAYMENT SOLUTIONS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Letty Cardenas

Name of Person

1ST. PAYMENT SOLUTIONS LLC

Firm/Company

130 Town Center Blvd. #5204

Address

CLERMONT / FL / 34714

City/State and Zip Code

letty@1STPAYMENTSOLUTIONS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Letty Cardenas

Name of Person

at

352 631-4956

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

1ST PAYMENT SOLUTIONS LLC.

The Articles of Organization for this Limited Liability Company were filed on 12/06/2013 and assigned Florida document number 43000168989.

If Changing Registered Agent, Signature of New Registered Agent


AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020,

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.


Signature of a member or authorized representative of a member

Leticia Charret Cardenas.
Typed or printed name of signer