

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

DOCUMENT # L99000004615

1. Entity Name
LEARNING PAYS.COM, LLC

00 MAY 15 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
8350 NW 52ND TERRACE
MIAMI FL 33166

Mailing Address
8350 NW 52ND TERRACE
MIAMI FL 33166-7811



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
110 E. BROWARD BOULEVARD

3. Mailing Address
110 E. BROWARD BLVD.

Suite, Apt. #, etc.
Suite 1900

Suite, Apt. #, etc.
Suite 1900

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale

Zip
33301

Country
Broward

Zip
33301

Country
Broward

4. FEI Number
65-0930721

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.
ONE S.E. THIRD AVENUE, 28TH FLOOR
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR
THIMMIG, MARK F
4308 NE 22ND AVENUE
FORT LAUDERDALE FL 33308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
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CITY- ST- ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR President + CFO ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR SVP Technology & Business Dev.
Ritchie Hamm
4705 NE 23rd Ave
Ft. Lauderdale, FL 33308 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR SVP, General Counsel, Secretary
John Carey
6812 SW 75th Terrace
Miami, Florida 33143 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR SVP, CFO
John Rizzo
1416 Ponce de Leon Dr.
FTL, FL 33316 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4/19/00

Date

954-463-0900

Daytime Phone #

CR2E061 (9/99)