# M 13000001675

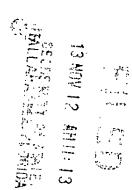
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October 28, 2013

BOBBIE CELLER 3600 FAU BLVD SUITE 101 BOCA RATON, FL 33431

SUBJECT: ELECTRONIC PAYMENT SYSTEMS-GLOBAL, LLC

Ref. Number: M13000001075

We have received your document for ELECTRONIC PAYMENT SYSTEMS-GLOBAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 113A00025106

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

### **COVER LETTER**

TO: Registration Section
Division of Corporations

ELECTRONIC PAYMENT SYSTEMS-GLOBAL, 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:

**Bobbie Celler** 

Name of Person

Celler Law, P.A.

Firm/Company

3600 FAU Boulevard, Suite 101

Address

Boca Raton, Fl 33431

City/State and Zip Code

bceller@thecellerorganization.com

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

For further information concerning this matter, please call:

**Bobbie Celler** 

561 869-8989

Name of Person

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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

### **SECTION I (1-3 must be completed)**

1.	Name of limited liability company as it appears on the records of the Florida Department of State: ELECTRONIC PAYMENT SYSTEMS- GLOBAL, LLC
2.	Jurisdiction of its organization: DELAWARE
3.	Date authorized to do business in Florida: 2/13/2013
	SECTION II (4-7 complete only the applicable changes)
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?
5.	New name of the limited liability company:  (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
Fl th	name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting alternate name. The alternate name must end with "Limited Liability Company," "L.E.C." (L.C.")
6.	If the amendment changes the period of duration, indicate new period of duration:
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction: SEE ATTACHMENT
<b>9</b> .	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.  Signature of a member or the authorized representative of a member  BOBBIE CELLER  Typed or printed name of signee
	Filing Fee: \$25.00

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Electronic Payment Systems – Global, LLC Ref. Number: M13000001075

November 5, 2013

Section II, 8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

### Principal office address:

3600 FAU Boulevard, Suite 101 Boca Raton, FL 33431

### Mailing address:

3600 FAU Boulevard, Suite 101 Boca Raton, FL 33431

### Registered Agent and Registered Office Address:

Bobbie Celler 3600 FAU Boulevard, Suite 101 Boca Raton, FL 33431

### Manager:

Bobbie Celler 3600 FAU Boulevard, Suite 101 Boca Raton, FL 33431

Signature of a member or authorized representative of a member

Bobbie Celler

Typed or printed name of signee