

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055897

Entity Name: EVEREST PAYMENT SOLUTIONS, LLC

Current Principal Place of Business:

350 CAMINO GARDENS BLVD
SUITE 200
BOCA RATON, FL 33432

Current Mailing Address:

350 CAMINO GARDENS BLVD
SUITE 200
BOCA RATON, FL 33432 US

FEI Number: 26-2752763

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTIN, FRIEND
350 CAMINO GARDENS BLVD
SUITE 200
BOCA RATON, FL 33432 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FRIEND, MARTIN
Address 350 CAMINO GARDENS BLVD
200
City-State-Zip: BOCA RATON FL 33432

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARTIN FRIEND

MANAGING MEMBER

02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date