

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000107512

Entity Name: NEW E-PAY, LLC

Current Principal Place of Business:

250 WILLIAMS STREET
SUITE M-100
ATLANTA, GA 30303

Current Mailing Address:

250 WILLIAMS STREET
SUITE M-100
ATLANTA, GA 30303 US

FEI Number: 27-1410884

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	CFO	Title	CEO, PRESIDENT, DIRECTOR
Name	BELMONTE, LARRY	Name	SMITH, M. BROOKS
Address	250 WILLIAMS STREET NW 5TH FLOOR SUITE 5-2002	Address	250 WILLIAMS STREET NW 5TH FLOOR SUITE 5-2002
City-State-Zip:	ATLANTA GA 30303	City-State-Zip:	ATLANTA GA 30303
Title	SECRETARY	Title	TREASURER
Name	GRUENHUT, MICHAEL D.	Name	GRANATO, STEPHANIE
Address	250 WILLIAMS STREET NW 5TH FLOOR SUITE 5-2002	Address	250 WILLIAMS STREET NW 5TH FLOOR SUITE 5-2002
City-State-Zip:	ATLANTA GA 30303	City-State-Zip:	ATLANTA GA 30303

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: MICHAEL D. GRUENHUT

SECRETARY

04/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date