

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000089621

**Entity Name:** PAY STRUCTURE EXPERTS, LLC

**Current Principal Place of Business:**

1185 MAHOGANY LANE  
WESTON, FL 33327

**Current Mailing Address:**

1185 MAHOGANY LANE  
WESTON, FL 33327

**FEI Number:** 45-2938764

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RELIABLE ACCOUNTING & TAX SERVICES, INC.  
2645 EXECUTIVE PARK DR SUITE 136  
WESTON, FL 33331 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 MGRM  
Name SILVA, MARIO C  
Address 1185 MAHOGANY LANE  
City-State-Zip: WESTON FL 33327

*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:** MARIO SILVA

MGRM

04/22/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date