

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000135158

**Entity Name:** PAYLESS RESPONSE TEAM LLC

**Current Principal Place of Business:**

500 NE 191ST STREET  
MIAMI, FL 33179

**Current Mailing Address:**

500 NE 191ST STREET  
MIAMI, FL 33179 US

**FEI Number:** 47-4772805

**Certificate of Status Desired:** No

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

ARNALI MGMT LLC  
500 NE 191ST STREET  
MIAMI, FL 33179 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:** LIMOR ELAZAR

05/01/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name NEWMAN, ABRAHAM  
Address 5742 BROOKFIELD CIR E  
City-State-Zip: FT. LAUDERDALE FL 33312

Title MGRM  
Name NEWMAN, HENSI  
Address 5742 BROOKFIELD CIR E  
City-State-Zip: FT. LAUDERDALE FL 33312

*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:** ABRAHAM NEWMAN

MGRM

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date