

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000110067

**Entity Name:** PAYTEGRITY, LLC

**Current Principal Place of Business:**

12779 ASHBROOK CIRCLE WEST  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

12779 ASHBROOK CIRCLE WEST  
JACKSONVILLE, FL 32225

**FEI Number: 85-0794428**

**Certificate of Status Desired: No**

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

BARBER, PEGGY A  
12779 ASHBROOK CIRCLE WEST  
JACKSONVILLE, FL 32225 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            CEO  
Name            BARBER, PEGGY A  
Address        12779 ASHBROOK CIRCLE WEST  
City-State-Zip: JACKSONVILLE FL 32225

Title            CFO  
Name            KALLUPURACKAL, JACOB MANI  
Address        752 PEPPERVINE AVE  
City-State-Zip: SAINT JOHNS FL 32259

Title            COO  
Name            STEWART, TIFFANY NICOLE  
Address        13232 AVERY PARK LANE  
City-State-Zip: JACKSONVILLE FL 32218

*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: PEGGY ANN BARBER**

**CEO**

**04/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date