

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000533684

Entity Name: MERGED PAYMENT PROS LLC

Current Principal Place of Business:

2980 NE 207TH STREET
SUITE 334
AVENTURA, FL 33180

Current Mailing Address:

2980 NE 207TH STREET
SUITE 334
AVENTURA, FL 33180 US

FEI Number: 92-1505206

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEIN, JORDAN
2901 CLINT MOORE ROAD #299
BOCA RATON, FL 33496 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 RUBIN, JEFFREY
Address 2901 CLINT MOORE ROAD #299
City-State-Zip: BOCA RATON FL 33496

Title MGR
Name STEIN, JORDAN
Address 2901 CLINT MOORE ROAD #299
City-State-Zip: BOCA RATON FL 33496

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: JEFFREY RUBIN

MGR

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date