## 2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000000186

**Entity Name: SIGHTLINE PAYMENTS LLC** 

**Current Principal Place of Business:** 

8400 W. SUNSET ROAD SUITE 210

LAS VEGAS, NV 89113

**Current Mailing Address:** 

8400 W. SUNSET ROAD **SUITE 210** 

LAS VEGAS, NV 89113 US

FEI Number: 26-2507943 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:

Name

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MEMBER** Title

REPRESENTATIVE SIGHTLINE PAYMENTS HOLDINGS Name GREENE, BRIAN

SUB LLC

Address 8400 W. SUNSET ROAD Address 8400 W. SUNSET ROAD

SUITE 210

LAS VEGAS NV 89113 City-State-Zip: LAS VEGAS NV 89113 City-State-Zip:

Title MANAGER

SIGHTLINE PAYMENTS HOLDINGS Name

8400 W. SUNSET ROAD Address

SUITE 210

City-State-Zip: LAS VEGAS NV 89113

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: BRIAN GREENE

CHIEF FINANCIAL **OFFICER** 

CFO, AUTHORIZED

SUITE 210

01/26/2025

Date

**FILED** Jan 26, 2025

**Secretary of State** 

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