

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000011996

**Entity Name:** REBEL PAYMENTS LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

30 N GOULD STREET  
SUITE R  
SHERIDAN, WY 82801

**Current Mailing Address:**

617 N MAGNOLIA AVENUE  
2ND FLOOR  
ORLANDO, FL 32801 US

**FEI Number:** 83-0561864

**Certificate of Status Desired:** Yes

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

WONG, ANTHONY  
617 N. MAGNOLIA AVENUE  
2ND FLOOR  
ORLANDO, FL 32801 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 MAYORAL, JASON  
Address 617 N MAGNOLIA AVE, 2ND FLOOR  
City-State-Zip: ORLANDO FL 32801

Title MGR  
Name WONG, ANTHONY  
Address 617 N MAGNOLIA AVE, 2ND FLOOR  
City-State-Zip: ORLANDO FL 32801

*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:** ANTHONY WONG

MGR

08/24/2021

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

\_\_\_\_\_  
Date