

No. <b>W 91324</b>		<b>Due no later than Mar 31, 2014</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> INTELISPEND PREPAID SOLUTIONS, LLC MARK WINKELER 1375 NORTH HIGHWAY DRIVE FENTON MO 63099 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	WILLIAM S MARITZ	1375 N. HIGHWAY DR.	FENTON	MO	USA	63099	
MANAGER	SHEREE THORNSBERRY	1400 S. HIGHWAY DR.	FENTON	MO	USA	63099	
MANAGER	JAMES MENADIER	1400 S. HIGHWAY DR.	FENTON	MO	USA	63099	
5. Organized Under the Laws of:  <b>MO W 91324</b>		6. Annual Report must be signed.* Signature: James Menadier Name (type or print): James Menadier					
		Date: 05/14/2014 Title: Manager					
Processed 05/14/2014		* Electronically provided signatures are accepted as original signatures.					