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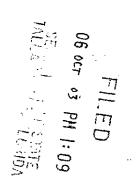
| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (issues) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| (Document (valide)) |
| Certified CopiesCertificates of Status |
| |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| Division of Corporations | | |
|---|--|-------------|
| SUBJECT: FSV Payment Syste | ms, Inc. | |
| | oration - must include suffix) | |
| Dear Sir or Madam: | | |
| | n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to | • . |
| Please return all correspondence concerning this re | natter to the following: | |
| Betsy McKernan, Chief Lega | l Counsel | |
| (Nar | me of Person) | |
| FSV Payment Systems, Inc. | | |
| | n/Company) | |
| 15710 JFK Blvd, Ste 500 | | |
| (| (Address) | |
| Houston, TX 77032 | | |
| (City/S | State and Zip code) | |
| For further information concerning this matter, ple | H | |
| Betsy McKernan at (8) | 32 , 201-6515 | Ë |
| (Name of Person) (A | Area Code & Daytime Telephone Number) | ED |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | |
| Enclosed is a check for the following amount: | | |
| \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy | |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| | yment Systems comoration; must include "I | | ," "COMPANY," "CORPO | ORATION," |
|---|---|--|--|---|
| | Corp," "Inc," "Co," or "Corp. | | , | • |
| (If name mayai | lable in Florida, enter altern | ate cornorate name | adonted for the numose of | transacting business in Florida) |
| Delawar | | and vorporate mann | adopted for the purpose of | , |
| | under the law of which it is | incorporated) | (FEI numb | er, if applicable) |
| · | per 16, 2004 | = ' | Perpetual | • |
| · | e of incorporation) | | (Duration: Year corp. wil | I cease to exist or "perpetual") |
| Novemb | er 1, 2006 | | | |
| | (Date first tra | | in Florida, if prior to registra 502, F.S., to determine pena | |
| 15710 JF | FK Blvd, Ste 50 | 0 Housto | on, TX 77032 | , |
| 1 | | rincipal office add | | |
| | | | | |
| | (C | Surrent mailing add | lress) | |
| . To engage in ag | v lawful act or activity for whic | ch comorations may | v he organized under the Gen | eral Corporation Law of the State of Del |
| (Purpose(s | s) of corporation authorized | in home state or c | ountry to be carried out in st | ate of Florida) |
| Name and stree | et address of Florida regis | stored agent: P (|) Roy NOT accentable) | O6 TALL |
| | CT Corporation | - ` | _ ·_ · | 2 5 |
| Name: | | | · · | |
| office Address: | 1200 S. Pine | Island Ro | ad | |
| | Plantation | | , Florida 33324 | |
| | (City | y) | (Zip code | |
| 0. Registered as | gent's acceptance: | | | 7 <u>0</u> € 31. |
| laving been nam esignated in this orther agree to c | ed as registered agent an application, I hereby acc omply with the provision. | cept the appoints s of all statutes r | nent as registered agent o | ve stated corporation at the place and agree to act in this capacity. I complete performance of my dution |
| | Barlara | abur | re | Barbara A. Burke Special Assistant Secretary |
| | (Registered | agent's signature) | | |

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

| 12. Names and business addresses of officers and/or directors: | |
|---|-----------------|
| A. DIRECTORS | |
| Chairman: Jonathan Palmer | |
| Address: 15710 JFK Blvd, Ste 500, Houston, TX 77032 | |
| | r |
| Vice Chairman: | - -: |
| Address: | |
| | - - |
| Director: Robert Tointon | |
| Address: Bank One Plaza, 822 7th St, Ste 700 | |
| Greeley, CO 80632 | n 111 |
| Director: Duane Hays | <u>-</u> |
| Address: 705 Crestfield Grove | ± |
| Colorado Springs, CO 80906 | <u>.</u> . |
| B. OFFICERS | |
| President: (CEO) Jonathan Palmer | |
| Address: 15710 JFK Blvd, Ste 500, Houston, TX 77032 | - |
| | . 1 .: |
| Vice President: | |
| Address: | = |
| | |
| Secretary: Lisa Cohen | 1. <u>-</u> |
| Address: 15710 JFK Blvd, Ste 500, Houston, TX 77032 | |
| Treasurer: | <u></u> |
| Address: | |
| | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. | |
| (Signature of Director or Officer listed in number 12 of the application) | |
| Jonathan Palmer, CEO FSV Payment Systems, Inc. | |
| (Typed or printed name and capacity of person signing application) | - |

FSV PAYMENT SYSTEMS, INC. APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

ADDITIONAL DIRECTORS

Rob Stone 475 Steamboat Road Greenwich, CT 06830

William Mahone 475 Steamboat Road Greenwich, CT 06830

Delaware

PAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FSV PAYMENT SYSTEMS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF SEPTEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE REEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5055192

DATE: 09-20-06

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