## **2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000003337

Entity Name: VISA TECHNOLOGY & OPERATIONS LLC

**Current Principal Place of Business:** 

900 METRO CENTER BLVD. FOSTER CITY. CA 94404

**Current Mailing Address:** 

900 METRO CENTER BLVD. FOSTER CITY, CA 94404

FEI Number: 74-3070018 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:

Electronic Signature of Registered Agent

Date

FILED Mar 08, 2019

**Secretary of State** 

6627999122CC

Authorized Person(s) Detail:

 Title
 ASST. SECRETARY
 Title
 ASST. SECRETARY

 Name
 CHOI, SUE
 Name
 HEATON, TRACEY

 Address
 900 METRO CENTER BLVD.
 Address
 1 MARKET STREET

SUITE 600

SECRETARY, MANAGER

SAN FRANCISCO CA 94105

City-State-Zip: FOSTER CITY CA 94404

City-State-Zip: SAN FRANCISCO CA 94105

Title

City-State-Zip:

Title ASST. SECRETARY

Name KATCHER, SIMONA
Name MAHON TULLIER, KELLY
Address 900 METRO CENTER BLVD.

Address 1 MARKET STREET

City-State-Zip: FOSTER CITY CA 94404 SUITE 600

Title TREASURER

NameOSTROWSKI, COLLEENTitleASST. SECRETARYAddress900 METRO CENTER BLVD.NameSTEWART, DOUGLAS

City-State-Zip: FOSTER CITY CA 94404 Address 900 METRO CENTER BLVD.

City-State-Zip: FOSTER CITY CA 94404

City-State-Zip: FOSTER CITY CA 94404

Title CEO, MANAGER

Name TANEJA, RAJAT Title CFO

Address 900 METRO CENTER BLVD. Name SPAINHOUR, KYLE

City-State-Zip: FOSTER CITY CA 94404 Address 900 METRO CENTER BLVD.

City-State-Zip: FOSTER CITY CA 94404

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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: SIMONA KATCHER ASST SECRETARY

03/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

## **Authorized Person(s) Detail Continued:**

Title MANAGER Title MANAGER

Name D'HOORE, STEFAN Name SESHADRI, SUNIL

Address 900 METRO CENTER BLVD. Address 900 METRO CENTER BLVD.

City-State-Zip: FOSTER CITY CA 94404 City-State-Zip: FOSTER CITY CA 94404

Title MANAGER
Name TAN, ANDREW

Address 900 METRO CENTER BLVD.

City-State-Zip: FOSTER CITY CA 94404