

2024 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

Authorized Person(s) Detail :

Title ASST. SECRETARY
Name CHOI, SUE
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title ASST. SECRETARY
Name GORDON, DAN
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title ASST. SECRETARY
Name LEWEN, ULRIC
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title MANAGER AND SECRETARY
Name ROTTENBERG, JULIE
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title TREASURER, MANAGER
Name OSTROWSKI, COLLEEN
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title MANAGER, CEO AND CHAIRMAN
Name TANEJA, RAJAT
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title CFO
Name SPAINHOUR, KYLE
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title MANAGER
Name TAN, ANDREW
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: ULRIC LEWEN

ASSISTANT SECRETARY

03/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title CHIEF RISK OFFICER
Name ROJAS, DAYSI
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title COO
Name DILGER, TERESA
Address 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404

Title ASSISTANT SECRETARY
Name CUSACK, RICHARD
Address C/O 900 METRO CENTER BLVD.
City-State-Zip: FOSTER CITY CA 94404