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01 JUN 28 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Equivox Payment Services, Amend
(Corporation Name) (Document #)

2. Inc
(Corporation Name) (Document #)

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-06/28/01--01105--016
*****52.50 *****52.50

3. _____
(Corporation Name) (Document #)

(Corporation Name)

(Document #)

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 JUN 28 PM 2:31
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SUFFICIENCY OF FILING

☐ Pick up time

☐ Will wait

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☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☒ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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JUN 28 PM 3:35
CLERK, JUDICIAL DISTRICT COURT
TALLAHASSEE, FLORIDA

1. EQUIFAX PAYMENT SERVICES, INC.

Name of corporation as it appears on the records of the Department of State.

2. DELAWARE

Incorporated under laws of

3. 3/23/78

Date authorized to conduct affairs in Florida

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 6-21-01

5. CERTEGY PAYMENT SERVICES, INC.

Name of corporation after the amendment, adding suffix "corporation" or "incorporated", or appropriate abbreviation, if not contained in new name of the corporation. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.

6. If the amendment changes the period of duration, indicate new period of duration and the date the change was effected.

N/A

New Duration

Date _____

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction and the date the change was effected.

N/A

New Jurisdiction

Date _____

8. If the purpose which the corporation intends to pursue in Florida has changed indicate new purpose.

N/A

The corporation is authorized to pursue such purpose in the jurisdiction of its incorporation.

Signature _____

JUNE 26, 2001

Date _____

KENT E. MAST

Typed or printed name

VICE PRESIDENT & SECRETARY

Title

State of Delaware

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Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "EQUIFAX PAYMENT SERVICES, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "CERTEGY PAYMENT SERVICES, INC.", THE TWENTY-FIRST DAY OF JUNE, A.D. 2001, AT 9 O'CLOCK A.M.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 1206283

010302155

DATE: 06-22-01