## Florida Department of State

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### FOREIGN PROFIT/NONPROFIT CORPORATION

#### **Payment Alliance Processing Corporation**

Certificate of Status	0
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T. Buren FEB 2'5 2089

# 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.

Ĭ.

1. Payment Alliance I (Enter name of corporation; mu "Inc.," "Co.," "Corp," "Inc," "C	st include "INCORPORATED	O," "COMPANY," "CORPORATION,"	
(If name unavailable in Florida	enter alternate corporate name	e adopted for the purpose of transacting business in Flori	da)
2. Delaware	3	20-8631138	
(State or country under the law		(FEI number, if applicable)	
4. 10/27/2006	5	Perpetual	200
(Date of incorporation		(Duration: Year corp. will cease to exist or "perpetua	
6, 10/01/2006			25日 2
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)	THO F
7, 11857 Commonwea	alth Drive Louisville	e, KY 40299	3
	(Principal office add	hess)	# # <b>2</b>
11857 Commonwea		<u> </u>	<u>デロー</u> る
	(Current mailing ad-	dress)	
8. Bankcard merchan	t annications		
6. (Purpose(s) of corporation	applications	ountry to be carried out in state of Florida)	
9. Name and street address of F			
CTCorr			
140,40,			
Office Address: 1200 So	4th Pine Island	Road	
Plant	ation	, Florids <u>33324</u> (Zip code)	
<u></u>	(City)	(Zip code)	
designated in this application, i	ed agent and to accept servi hereby accept the appoint e provisions of all statutes r	ice of process for the above stated corporation at the ment as registered agent and agree to act in this ca relative to the proper and complete performance of wition as registered agent.	pacity. I
•			
·		Connie Bruan	
<b>/</b>		Connie Bryan  Assistant Secretary	

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.

(Typed or printed name and capacity of person signing application)

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAYMENT ALLIANCE PROCESSING CORPORATION" 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 THIRTEENTH DAY OF FEBRUARY, A.D. 2009.

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

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

4240982 8300

Jeffrey W. Bulkock, Societary of CATION: 7135858

DATE: 02-13-09