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Florida Department of State
Division of Corporations
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FOREIGN PROFIT/NONPROFIT CORPORATION
MERCHANTS BANKCARD SYSTEMS OF AMERICA, INC.

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June 26, 2014

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Florida 32314

RE: Letter of Consent

To whom it may concern:

I am the holder of the name MERCHANTS BANKCARD SYSTEMS OF AMERICA LLC in the State of Florida.

I now wish to register the name MERCHANTS BANKCARD SYSTEMS OF AMERICA INC in the State of Florida. I hereby consent to allow MERCHANTS BANKCARD SYSTEMS OF AMERICA INC to use the name for registration purposes.

Sincerely,

A handwritten signature in black ink, appearing to read "Philip Chait".

Philip Chait, Member

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14 JUL 24 AM 8 45
TALLAHASSEE, FLORIDA

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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.

MERCHANTS BANKCARD SYSTEMS OF AMERICA, INC.

1. MERCHANTS BANKCARD SYSTEMS OF AMERICA, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 37-1645702
(State or country under the law of which it is incorporated) (FET number, if applicable)

4. 8/11/2011 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 9-24-2013
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

70 E Falmouth Highway Suite 1, Falmouth, Massachusetts 02536

(Principal office address)

70 E Falmouth Highway Suite 1, Falmouth, Massachusetts 02536

(Current mailing address)

8. All lawful business

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Business Filings Incorporated

Office Address: 515 E. Park Avenue

Tallahassee Florida 32301

(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Mark Williams

Mark Williams, AYP, Business Filings Incorporated

(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.

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TALLAHASSEE, FLORIDA

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Philip Chait

Address: 70 E Falmouth Highway Suite 1, E Falmouth, Massachusetts 02536

Director: _____

Address: _____

B. OFFICERS

President: Philip Chait

Address: 70 E Falmouth Hwy Suite 1, Falmouth, Massachusetts 02536

Vice President: Philip Chait

Address: 70 E Falmouth Hwy Suite 1, Falmouth, Massachusetts 02536

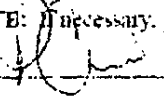
Secretary: Philip Chait

Address: 70 E Falmouth Hwy Suite 1, Falmouth, Massachusetts 02536

Treasurer: Philip Chait

Address: 70 E Falmouth Hwy Suite 1, Falmouth, Massachusetts 02536

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

14. Philip Chait, President

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

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MERCHANTS BANKCARD SYSTEMS OF AMERICA, 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 TWENTY-SECOND DAY OF JULY, A.D. 2014.

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.

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14 JUL 24 AM 8:45

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You may verify this certificate online
at corp.delaware.gov/authver.shtml



Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1555333

DATE: 07-22-14