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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/2

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000001492

1. Corporation Name
Fiserv Investor Services, Inc.

REINSTATEMENT 05-06

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 82 Devonshire Street | 82 Devonshire Street |
| Suite, Apt. #, etc. F7B | Suite, Apt. #, etc. F7B |
| City & State Boston, MA | City & State Boston, MA |
| Zip 02109 Country USA | Zip 02109 Country USA |

4. Date Incorporated or Qualified To Do Business in Florida 3/28/1995
5. FEI Number 23-2728489 ☐ Applied For ☐ Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent
Name: CT Corporation
Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road
Suite, Apt. #, Etc.:
City: Plantation State: FL Zip Code: 33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.
Signature of Registered Agent: TRACI HOUCK
SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN
Date 4/20/06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|---|---|---|---|
| Director | Mark Katzelnick | 82 Devonshire Street | Boston, MA 02109 |
| Director | Stephen J. Phillips | 82 Devonshire Street | Boston, MA 02109 |
| Pres. | Stephen J. Phillips | 82 Devonshire Street | Boston, MA 02109 |
| Treas. | James O'Neill | 82 Devonshire Street | Boston, MA 02109 |
| Asst.Sec | Susan Sturdy | 82 Devonshire Street | Boston, MA 02109 |
| | | 82 Devonshire Street | Boston, MA 02109 |

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exception contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Susan Sturdy Susan Sturdy, Assistant Secretary 617-563-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

TL010 - 01/04/2006 C T System Online

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K. Eckel APR 20 2006

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Division of Corporations

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# Florida Department of State
Division of Corporations
Public Access System

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## CORPORATION REINSTATEMENT

**FISERV INVESTOR SERVICES, INC.**

| | |
|---|---|
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