2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F95000001494 May 30, 2000 8:00 am Secretary of State 1. Entity Name U.S. BANCORP INFORMATION SERVICES, INC. 05-30-2000 90062 037 ***150.00 Principal Place of Business Mailing Address 601 SECOND AVENUE SOUTH 601 SECOND AVENUE SOUTH MPFP2804 MINNEAPOLIS MN 55402 MINNEAPOLIS MN 55402-4303 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 41-0880291 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION, SYSTEM ... Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITLE Delete TITLE HEASLEY, PHILIP G NAME NAME STREET ADDRESS 601 SECOND AVENUE SOUTH STREET ADDRESS CITY-ST-ZIP MINNEAPOLIS MIN CITY-ST-ZIP ☐ Change XX Addition TITLE President Delete SANDVIK, TERRENCE P NAME NAME Heasley, Philip G. 1200 ENERGY PARK DRIVE STREET ADDRESS STREET ADDRESS 601 Second Avenue South Minneapolis, MN 55402 CITY-ST-ZIP ST PAUL MN CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE DOLAN, TERRANCE R NAME NAME 2751 SHEPARD RD STREET ADDRESS STREET ADDRESS ST PAUL MN 55116 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE CHOSY, JAMES L. NAME NAME 601 SECOND AVE S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MINNEAPOLIS MN 55402 CITY-ST-ZIP SVP Senior Vice President ☐ Change XX Addition **☒** Delete TITLE TITLE SCHOEN, ALAN L Partel, Jr., Frances J. NAME NAME 1200 ENERGY PARK DR STREET ADDRESS STREET ADDRESS 601 Second Avenue South ST PAUL MN 55116 CITY-ST-7IP CITY-ST-ZIP Minneapolis, MN 55402 VP Addition ☐ Change TITLE ☐ Delete TITLE ROGNES, LUCY NAMÉ NAME 2401 E ARAPAHOE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LITTLEWON CO 80122

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver entrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/2000

612/973-0359

Daytime Phone #