## F98000001829

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ACCOUNT NO. : I2000000195

REFERENCE: 306533 7596839

AUTHORIZATION

COST LIMIT

ORDER DATE: August 8, 2012

ORDER TIME : 8:45 AM

ORDER NO. : 306533-242

CUSTOMER NO: 7596839

## CHANGE OF AGENT

NAME: VIANT PAYMENT SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this image is submitted for a corporation organized under the laws of the State of Delaware it to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: VIANT PAYMENT SYSTEMS, INC.	
	office address:	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 03/31/1998 Document number: F98000001829	_
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation, FL 33324	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	Corporation Service Company بن الله الله الله الله الله الله الله الل	)
	1201 Hays Street  P.O. Box NOT acceptable	
	Tallahassee, FL 32301	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
\ / / /	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
11 ac	Maureen Cathell, Vice President  Printed or typed name and title	
I hereby accept I further agree is performance of agent. Or, if this hereby confirm Corporation  Sign	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.  on Service Company  Cl  Date	
	Chalf of an entity:	
	E. Kirby, Asst. VP	

\* \* \* FILING FEE: \$35.00 \* \* \*