

# F98000005034

**EDS**

*Via AirBorne Express*

August 31, 1998

**EXPEDITE SERVICE  
REQUESTED**

Dept. of State  
Division of Corporations  
409 E. Gaines St.  
Tallahassee FL 32399

700002632697--8  
-09/04/98--01109--004  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Re: Shamrock ATM Inc.

Dear Sir or Madam:

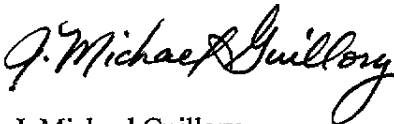
Enclosed you will find the following items necessary to filing an Application for Certificate of Authority:

- Completed Application (in duplicate)
- Certificate of Good Standing and Legal Existence as filed in Shamrock ATM Inc.'s home state of Delaware
- A check in the amount of \$70.00 to cover the filing and expedite fees
- A Federal Express Airbill to make returning proof of filing easier

If additional information is needed or if you have any questions regarding this matter I can be reached at 972 / 605-2031.

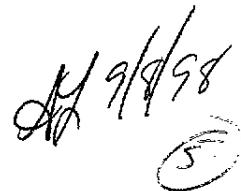
Thank you for your help.

Sincerely,



J. Michael Guillory

Paralegal Associate



Encls

Office of the Corporate Secretary  
H3-3A-05  
5400 Legacy Drive  
Plano, Texas 75024  
(972) 605-6139  
Fax: (972) 605-6135

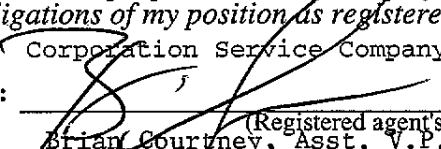
# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

1. SHAMROCK ATM INC.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DELAWARE  
(State or country under the law of which it is incorporated)
3. 75-2776920  
(FEI number, if applicable)
4. 04/31/98  
(Date of Incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. N/A  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 5400 Legacy Drive  
Plano, TX 75024  
(Current mailing address)  
Owning, leasing and/or operating and processing of automated teller machines
8. \_\_\_\_\_  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**  
  
Name: Corporation Service Company  
  
Office Address: 1201 Hays Street  
  
Tallahassee, Florida, 32301  
(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.*

By: Corporation Service Company  
  
(Registered agent's signature)  
Brian Courtney, Asst. V.P.

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.

12. Names and addresses of officers and/or directors: (Street address **ONLY**- P. O. Box **NOT** acceptable)

**A. DIRECTORS (Street address only- P. O. Box NOT acceptable)**

Chairman: See attached officers/directors rider

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only- P. O. Box NOT acceptable)**

President: See attached officers/directors rider

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

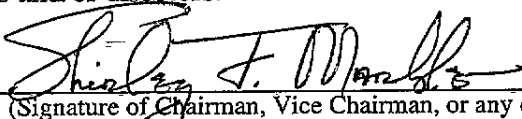
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Shirley J. Marble - Secretary  
(Typed or printed name and capacity of person signing application)

## **Directors, Officers Report**

### **Shamrock ATM Inc.**

August 28, 1998

#### **DIRECTORS**

Dale H. Dentlinger  
Paul E. Rudolph  
Kevin M. Tierney

Director  
Director  
Director

#### **OFFICERS**

Paul E. Rudolph  
John R. Castle, Jr.  
Dale H. Dentlinger  
Kevin M. Tierney  
Shirley J. Marble  
Scott J. Krenz  
Lisa V. Thomas  
Barbara Barton  
B. E. Buddendorf  
R. Randall Capps  
William R. Evans

President  
Vice President  
Vice President  
Vice President  
Secretary  
Treasurer  
Assistant Secretary  
Assistant Treasurer  
Assistant Treasurer  
Assistant Treasurer  
Assistant Treasurer

#### **Mailing Address for all Directors and Officers:**

5400 Legacy Drive  
Plano, TX 75024

*State of Delaware*  
*Office of the Secretary of State*

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PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHAMROCK ATM 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 THIRTY-FIRST DAY OF AUGUST, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



  
\_\_\_\_\_  
Edward J. Freel, Secretary of State

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981339222

AUTHENTICATION: 9278460

DATE: 08-31-98