2001 UNIFORM BUSINESS REPORT (UBR) FILED May 24, 2001 8:00 am DOCUMENT # F 98 00000 50 34 Secretary of State SHAMROCK ATM INC. 05-24-2001 90321 047 ***150.00 Principal Place of Business 90 Hudson St., 7th fl 200 Vesey St. NY, NY 10285 Jersey City NJ 07302-553247 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite Apt. # etc. 4. FEI Number Applied For City & State City & State 75-2776920 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays St. Tallahassee, FL 32301-2525 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its egistered office or registered agent, or both, in the State of Florida SIGNATURE . DATE (NOTH Reg stered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 201 1 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payab e to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition □ Delete FITLE NAME STREET ADDRESS STREET ADDRESS tachment CITY-ST-ZIP CITY-ST-7IP Addition Change Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete HITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 the and accurate and that not 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 or trustee empowered to execute this report is 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER CADIRECTOR SO

2/10/99

Attachment# F9800005034

SHAMROCK ATM INC. American Express Tower 200 Vesey St. NEW YORK, NY 10285

553247

Title	Name	Address
President	David C. House	200 Vesey St., NY, NY 10285
Vice President	Stephen J. Squeri	200 Vesey St., NY, NY 10285
CFO & Treasurer	Lisa Simone Westlake	200 Vesey St., NY, NY 10285
Secretary	Stephen P. Norman	200 Vesey St., NY, NY 10285
Director	David C. House	200 Vesey St., NY, NY 10285
	Lisa Simone Westlake	200 Vesey St., NY, NY 10285
	Stephen P. Norman	200 Vesey St., NY, NY 10285