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COVER LETTER

Divi.	sion of Corporation	S				
SUBJECT:	Fleetcor Technolog	ies Operating (Company, LLC			
.,01,01,01	ì	Name of Foreig	ın Limited Lial	oility Co	mpany	
Dear Sir or N	Madam:					
The enclosed	d application, certifi	cate and fee(s)	are submitted	for filing	<u>.</u>	
Please return	all correspondence	concerning th	is matter to the	followin	ng:	
Shelly Troy						
	Name of	Person		_		
Corpay, Inc.						
	Firm/Co	mpany		_	J.	71711
5301 Maryla	nd Way					MENHAY 23 MILL: 27
	Addı	ress		_	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
Brentwood,	TN 37027				्छ (स •	
	City/Sta	te and Zip Cod	e	_	-	15 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
stroy@como	ata.com					
E-mail ad	dress: (to be used fo	or future annua	l report notifica	tion)		
For further i	nformation concern	ing this matter.	please call:			
Shelly Troy		_	615 at (370-7	626	
	Name of Person		_ \	& Dayt	time Telephone Number	
Reg Divi P.O.	ing Address: estration Section sion of Corporation Box 6327 ahassee, FL 32314	ns		Division The Ce 2415 N	address: ration Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 8 assee, FL 32303	310
	osed is a check for					
□\$25 Filing	,	ing Fee & cate of Status	□ \$55 Filing Certified (☐ \$60 Filing Fee, Certificate of State Certified Copy	.ıs &

TO: Registration Section

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

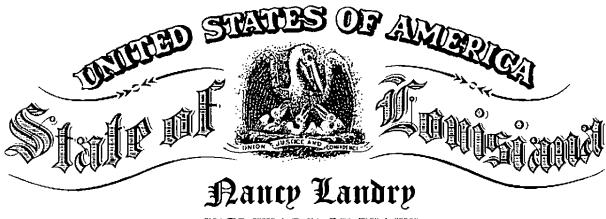
SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Fleetcor Technologies Operating Company, LLC
Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
2. The Florida document number of this limited liability company is: M0400005354
3. Jurisdiction of its organization: Louisiana
4. Date authorized to do business in Florida: December 6, 2004 SECTION II (5-9 complete only the applicable changes) Corpay Technologies Operating Company, LLC
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: Corpay Technologies Operating Company, LLC (must contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida Street Address
Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent: 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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
e/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action		
		<u> </u>	□Add		
			Remove		
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			□Remove		
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	ificate, if required: no more than 90		□Remove		

Filing Fee: \$25.00

Typed or printed name of signee



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

CORPAY TECHNOLOGIES OPERATING COMPANY, LLC

A limited liability company domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on December 06, 2004,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

April 23, 2024

Certificate ID: 11874910#93P83

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Mancy Jandry Secretary of State

Web 35829844K



As Secretary of State, of the State of Louisiana, I do hereby Certify that

the attached document(s) of

CORPAY TECHNOLOGIES OPERATING COMPANY, LLC

are true and correct and are filed in the Louisiana Secretary of State's Office.

45871283

NMCHG

03/25/2024

page (s)

THE FILE TO THE SECRETARY SEE STATE

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

April 30, 2024

Mancy Landry

Secretary of State



Certificate ID: 11877793#UAR93

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

STATE OF LOUISIANA

NAME CHANGE AMENDMENT

R.S. 12:1309

Old Name:

FLEETCOR TECHNOLOGIES OPERATING COMPANY, LLC

New Name:

CORPAY TECHNOLOGIES OPERATING COMPANY, LLC

Date Amendment Adopted:

03/25/2024

Manner of Adoption:

UNANIMOUSLY APPROVED BY MEMBERS

The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to fine or imprisonment or both under R.S. 14:133.

BY TYPING MY NAME BELOW, I HEREBY CERTIFY THAT I AM A MEMBER/MANAGER.

ELECTRONIC SIGNATURE: TY ROBERT MILLER (3/25/2024)

TITLE: MEMBER



Corpay^{*}

May 20, 2024

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Application By Foreign Limited Liability Company To File Amendment to Certificate of Authority to Transact Business in Florida for Fleetcor Technologies Operating Company, LLC to Corpay Technologies Operating Company, LLC

Dear Registration Section – In connection with the above referenced, enclosed please find an Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida for filing, together with a \$30 check, as well as a current certificate of existence from Louisiana and a certified copy of the name change.

If the enclosed meets with your approval, please file and provide me with a copy of same

Should you have any questions, please contact me at 615-370-7626 or via email at stroy@comdata.com.

Thank you in advance,

Corpay, Inc.

Paralegal