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DOCUMENT # P32747

(8)

INTERPAYMENT SERVICES LIMITED, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name and Address of Corporation 75 WALL STREET 10TH FLOOR NEW YORK NY 10005-2833 US		2a. Mailing Address 75 WALL STREET, 10TH FLOOR ATT: BARBARA A. HAMMEL NEW YORK NY 10005-2833 US		3. Date of Incorporation or Organization 02/01/1991		3a. Date of Last Report 02/21/1994	
2. Principal Office (If Different) 21. P.O. Box 36 22. Thorpe Wood 23. Peterborough 24. PE36 5B 25. ENGLAND 26. 27. 3 INDEPENDENCE WAY 28. PRINCETON NJ 29. 08540 30. USA		4. FET Number 13-3565265		5. Certificate of Status Debated ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under S. 190.012, Florida Statutes ☐ Yes ☒ No		8. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324					
9. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City FL 85. Zip Code		10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City FL 85. Zip Code					
11. I, the undersigned, being a duly qualified officer or director of the above named corporation, do hereby certify that the information furnished on this form is true and correct, and that I am a resident of the State of Florida, and that the corporation is authorized to change its registered office in accordance with the provisions of Chapter 689, Florida Statutes.							
SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If Any)							
12. OFFICERS AND DIRECTORS NAME: BUTT, RICHARD T. STREET ADDRESS: 160 EAST 38TH STREET, APT. 26H CITY: NEW YORK NY NAME: STIRLING, LAWRENCE W. STREET ADDRESS: 102 IRONGATE LANE CITY: ARBERDEEN NJ NAME: RADLEY, NEIL A. STREET ADDRESS: 7 ASHTON CROSS WILLOW CITY: HANTS, ENGLAND NAME: HAWARD, PETER G. STREET ADDRESS: GATECOMBE HOUSE WICKHAM CITY: WIMBORNE, DORSET ENG NAME: JABLONOWSKI, ALEXANDER M STREET ADDRESS: 52 HOE LANE CITY: WARE HERTS EN NAME: FERANDO, ELIZABETH L STREET ADDRESS: 2000 BROADWAY CITY: NEW YORK NY				13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If Any) NAME: ANTHONY J. JOHNSON STREET ADDRESS: 45 BARKLEY STREET CITY: LONDON W1A 1EB ENGLAND NAME: JOHN A. McEVAN STREET ADDRESS: P.O. Box 36 Thorpe Wood CITY: Peterborough PE3 6EA ENGLAND NAME: Graham H. Rider STREET ADDRESS: 45 BARKLEY STREET CITY: LONDON W1A 1EB ENGLAND NAME: Ian Spang STREET ADDRESS: P.O. Box 36 Thorpe Wood CITY: Peterborough PE3 6EA ENGLAND NAME: [blank] STREET ADDRESS: [blank] CITY: [blank] NAME: [blank] STREET ADDRESS: [blank] CITY: [blank]			

14. I, the undersigned, do hereby certify that the information supplied on this form is substantially true and correct, and that I am a resident of the State of Florida, and that the corporation is authorized to change its registered office in accordance with the provisions of Chapter 689, Florida Statutes, and that my signature shall have the same legal effect as if made under oath. That I am a resident of the State of Florida, and that the corporation is authorized to change its registered office in accordance with the provisions of Chapter 689, Florida Statutes, and that my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]* ATTORNEY-IN-FACT Robert G. [Signature] 4/1/95 (104) P1 2310
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR