

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000100169

Entity Name: FACEBOOK PAYMENTS INC.**Current Principal Place of Business:**1601 WILLOW ROAD
MENLO PARK, CA 94025**Current Mailing Address:**1601 WILLOW ROAD
MENLO PARK, CA 94025 US**FEI Number:** 27-4444984**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	LIU, DEBORAH
Address	1601 WILLOW ROAD
City-State-Zip:	MENLO PARK CA 94025

Title	DIRECTOR
Name	LEVINE, MARNE
Address	1601 WILLOW ROAD
City-State-Zip:	MENLO PARK CA 94025

Title	SECRETARY, CCO
Name	LAWRENCE, FRANK
Address	1601 WILLOW ROAD
City-State-Zip:	MENLO PARK CA 94025

Title	DIRECTOR
Name	SONDERBY, CHRISTOPHER
Address	1601 WILLOW ROAD
City-State-Zip:	MENLO PARK CA 94025

Title	DIRECTOR
Name	WEHNER, DAVID
Address	1601 WILLOW ROAD
City-State-Zip:	MENLO PARK CA 94025

Title	CFO
Name	TAYLOR, SUSAN
Address	1601 WILLOW ROAD
City-State-Zip:	MENLO PARK CA 94025

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK LAWRENCE**SECRETARY****05/01/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date