No. C 201868		Due no later than Apr 30, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. FSV PAYMENT SYSTEMS, INC. 800 NICOLLET MALL BC-MN-H210 MINNEAPOLIS MN 55402		2. Registered Age	2. Registered Agent and Address (NO PO BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				921 S ORCHAI BOISE ID 83				
4. Corporations: Enter Na	mes and Busin	ess Addresses o	of President, Secretary, and Directors. Treasu	ırer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JOHN C STE	EWARD	950 17TH STREET	DENVER	CO	USA	80202	
SECRETARY			800 NICOLLET MALL	MINNEAPOLIS	MN		55402	
DIRECTOR	ASIM K MA		700 DEERFIELD ROAD	DEERFIELD	IL	USA	60015	
DIRECTOR	PETER L KL		302 W 3RD ST	CINCINNATI	OH	USA	45202	
PRESIDENT	PETER L KL	UKKEN	302 W 3RD ST	CINCINNATI	ОН	USA	45202	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE C 201868		Signature: Natasha M. Knack		Date: (Date: 04/17/2017			
		Name (type or print): Natasha M. Knack		Title:	Title: Assistant Secretary			
Processed 04/17/2017 * Electronically provided signatures are accepted as original signatures.								