

No. C 193615		Due no later than Feb 28, 2017		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. ASSURANT PAYMENT SERVICES, INC. 11222 QUAIL ROOST DR MIAMI FL 33157-6543		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	CARRIE REIGELMAN RANKIN	11222 QUAIL ROOST DR	MIAMI	FL	USA	33157-6543
SECRETARY	JEANNIE AMY ARAGON-CRUZ	11222 QUAIL ROOST DR	MIAMI	FL	USA	33157-6543
DIRECTOR	IVAN C LOPEZ-MORALES	11222 QUAIL ROOST DR	MIAMI	FL	USA	33157-6543
DIRECTOR	MANUEL JOSE BECERRA	11222 QUAIL ROOST DR	MIAMI	FL	USA	33157-6543
DIRECTOR	JOSEPH EDWARD ERDEMAN	260 INTERSTATE NORTH CIRCLE SE	ATLANTA	GA	USA	30339
DIRECTOR	CARRIE REIGELMAN RANKIN	11222 QUAIL ROOST DR	MIAMI	FL	USA	33157-6543
TREASURER	ANDREW PAUL CHUNG	11222 QUAIL ROOST DR	MIAMI	FL	USA	33157-6543
5. Organized Under the Laws of: FL C 193615		6. Annual Report must be signed.* Signature: JEANNIE AMY ARAGON-CRUZ Name (type or print): JEANNIE AMY ARAGON-CRUZ Date: 01/11/2017 Title: SECRETARY				
Processed 01/11/2017		* Electronically provided signatures are accepted as original signatures.				