

State of Idaho

Office of the Secretary of State

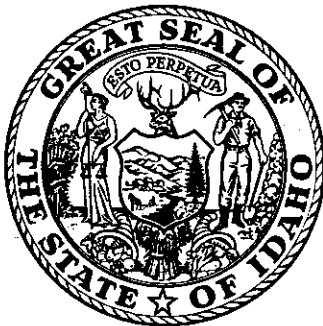
**CERTIFICATE OF AUTHORITY
OF
CENTRAL PAYMENT DEPLOYMENT, INC.**

File Number C 196850

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: December 18, 2012



Ben Yursa
SECRETARY OF STATE

By *Dinda Corbus*



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2012 DEC 18 PM 4:06

SECRETARY OF STATE
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

1. The name of the corporation is:

Central Payment Deployment, Inc.

2. The name which it shall use in Idaho is: _____

3. It is incorporated under the laws of: Delaware

4. Its date of incorporation is: 06/29/2012

5. The address of its principal office is:

3070 Kerner Blvd. Suite C, E & P, San Rafael, CA 94901

6. The address to which correspondence should be addressed, if different from item 5, is:

One TSYS Way, Columbus, GA 31902

7. The street address of its registered office in Idaho is: 1111 West Jefferson, Suite 530, Boise, Idaho 83702

and its registered agent in Idaho at that address is: C T Corporation System

8. The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>Mark Pyke</u>	<u>President/Direct</u>	<u>3070 Kerner Blvd. Suite C, E</u>
<u>Kathy Moates</u>	<u>Secretary</u>	<u>3070 Kerner Blvd. Suite C, E</u>
<u>Garilou Pare</u>	<u>Assistant Secret</u>	<u>3070 Kerner Blvd. Suite C, E</u>
<u>Eric La Forge</u>	<u>Tax Director</u>	<u>One TSYS Way, Columbus, GA 31</u>
<u>Jim Lipham</u>	<u>Director</u>	<u>3070 Kerner Blvd. Suite C, E</u>

Dated: 12/14/12

Signature: Marie Edwards

Typed Name: _____

Marie Edwards Vice President

Capacity: _____

(The signer must be a director or an officer of the corporation.)

Customer Acct # : _____

(If using pre-paid account)

Secretary of State use only

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forms\applicants\authority_profit.pmd
Revised 06/2005

Web Form

IDAHO SECRETARY OF STATE

12/19/2012 05:00

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C196850

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CENTRAL PAYMENT DEPLOYMENT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF DECEMBER, A.D. 2012.

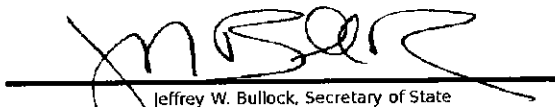
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5177681 8300

121342753

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0069430

DATE: 12-14-12