

No. W 28182		Due no later than Jan 31, 2015		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. PAYPOINT ELECTRONIC PAYMENT SYSTEMS, LLC ID REGULATORY REPORTING 5565 GLENRIDGE CONNECTOR NE STE 2000 ATLANTA GA 30342		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE 83713	
				3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
MEMBER	FIRST DATA VOICE SERVICES	5565 GLENRIDGE CONNECTOR NE	ATLANTA	GA	30342
5. Organized Under the Laws of: DE W 28182		6. Annual Report must be signed.* Signature: Timothy W. Heggen Name (type or print): Timothy W. Heggen Date: 01/15/2015 Title: Assistant Secretary of Member			
Processed 01/15/2015		* Electronically provided signatures are accepted as original signatures.			