^s	State of Rhode Island and Providence Plantations Office of the Secretary of State			
HOPE	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040			
Certificate Request Form				
Request Information (Entity Name is only required for a Certificate of Non-Existence)				
ID	ENTITY NAME		CERTIFICATE TYPE	
000113117	RCJ, Inc.		Good Standing Certificate	
Filer's Contact Information (Enter a contact name, mailing address and email.)				
Contact Name: ANGELA TOUSSAINT				
Business Name: <u>PRIORITY PAYMENTS SYSTEMS</u> No. and Street: 2001 WESTSIDE PKWY				
SUITE				
City or Town: <u>ALPHA</u> Contact Phone: <u>855-298</u>	RETTA	State: <u>GA</u>	Zip: <u>30004</u>	Country: <u>US</u>
Contact Email: JON.COHEN@AEXP.COM				
Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.				
Tor any reason. If no email address is provided, we will respond by mail.				
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