| State of Rhode Island and Providence Plantations | |
|---|----------|
| State of Rhode Island and Providence Plantations Department of State - Business Services | Division |

Certificate of Authority

FOREIGN Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <u>7-1.2-1405</u>, the undersigned foreign corporation hereby

| Trans. | | | _ | | |
|--|----------------------------------|----------------|---|--|--|
| City/Town East Providence | State RHODE ISLAND | Zip Code 02914 | | | |
| Street Address (<u>NOT</u> a P.O. Box) 450 Veterans Memor | rial Parkway, Suite 7A | | | | |
| Agent Name C T Corporation System | | | | | |
| 5. The name and address of the initial registered age | ent/office of in Rhode Island: | | | | |
| 15220 NW Greenbrier Pkwy #200, Beaverton, OR 97076 | | | | | |
| 5. The address of its principal office is: | | | | | |
| Date certain for dissolution | | | _ | | |
| And the period of its duration is: CHECK ONLY ON Repretual (on-going) | E BOX | | | | |
| 4. The date of its incorporation is: 04/30/2004 | | | | | |
| (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application: | | | | | |
| (a) If the name of the corporation in its jurisdiction of "incorporated", or "limited," or an abbreviation there above corporate endings for use in Rhode Island: | | | | | |
| 3. The name, if different, which it elects to use in Rh | node Island is: | ··· | | | |
| 2. It is incorporated under the laws of: Oregon | | | | | |
| Genesis Bankcard Services, Inc. | | | | | |
| 1. The name of the corporation is: | | | | | |
| for that purpose submits the following statement: | ess in the State of Rhode Island | d, and | | | |

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED = 2:46

BY 14. 294312

| 1 1 1 | any Notwithstand | ing the foregoing, the p | urpose of the corpo | business in Rhode Island are: pration is to engage in any lawful act or activity for a of incorporation. | |
|--|------------------|--|--|--|--|
| | | | | | |
| (a) The names and r state or country of which | | | optional, unless d | lirectors are required under the laws of the | |
| NAME | | ADDRESS | | | |
| Bruce Weinstein | | 15220 NW Greenbrier Pkwy #200, Beaverton, OR 97076 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | - | | | Check the box to indicate an attachment. | |
| 8. (b) The names and re of the state or country of | • | • • | ficers (mandator) | y if directors are not required under the laws | |
| OFFICE | | NAME | | ADDRESS | |
| PRESIDENT | Bruce Weinstein | n | 15220 NW Gree | enbrier Pkwy #200, Beaverton, OR 97076 | |
| VICE PRESIDENT | | | | | |
| TREASURER | Gregg Atkinson | | 15220 NW Greenbrier Pkwy #200, Beaverton, OR 97076 | | |
| SECRETARY | | • | | | |
| | | | | Check the box to indicate an attachment. | |
| 9. The aggregate number par value, and series, if | | | ssue; itemized by | classes, par value of shares, shares without | |
| NUMBER OF SHARES | CLASS | | SERIES | PAR VALUE OR STATE NO PAR VALUE | |
| 1,000,000 | Commor | 1 | | Ho Parvalue | |
| 100,000 | Preferre | | | Ho Par Value | |
| | | | | <u> </u> | |
| | | | | | |
| 10. (a) Estimate, in dollars, the value of all property to be within Rhode Island during the following year: | | | | | |
| located: \$O | | | \$ | 0 | |
| within this state during th | he following yea | r bears to the value o | f all property of the | property of the corporation to be located ne corporation to be owned during the 00 to obtain the percentage. | |

| 11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year. | (b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year. | | | | |
|---|---|--|--|--|--|
| s 100,000,000 | \$ 100,000 | | | | |
| (c) Estimate, as a percentage, the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage</i> . | | | | | |
| <u>0.100 %</u> | <u>0.100</u> % | | | | |
| 12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document. | | | | | |
| 13. Date when the Certificate of Authority will be effective: CHECK ONLY ONE BOX | | | | | |
| Date received (Upon filing) | | | | | |
| Later effective date (Date must be no more than 90 days from the day of filing) | | | | | |
| Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct. | | | | | |
| Type or Print Name of Authorized Officer | Date 2/8/17 | | | | |
| Gregg Atkinson | 2/2/17 | | | | |
| Signature of Authorized Officer of the Corporation | | | | | |
| In at | | | | | |

State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

Certificate of Existence 611L993W5

I, DENNIS RICHARDSON, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

GENESIS BANKCARD SERVICES, INC.

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

Sennes Echardson

DENNIS RICHARDSON, SECRETARY OF STATE

1/20/2017