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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAR 26 AM 10:01

Reinstatement

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000004109

1. Entity Name

Heartland Payment Systems, Inc.

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03-04

2. Principal Place of Business	3. Mailing Address
47 Hulfish Street	47 Hulfish Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Princeton, NJ	City & State: Princeton, NJ
Zip: 08542 Country: USA	Zip: 08542 Country: USA

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4. FEI Number: 22-3755714 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street

City: Tallahassee FL 32301

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Lynette Coleman — Lynette Coleman as its agent — DATE: 3/26/04

(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	See attached schedule.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

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CR2EO34B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Robert H.B. Baldwin, Jr. 3/19/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Heartland Payment Systems, Inc.

The address of the officers is 47 Hulfish Street, Princeton, NJ 05842.

Officers

Name	Title
Robert O. Carr	Chairman & Chief Executive Officer
Martin Uhle	Chief Operating Officer and President
Robert H.B. Baldwin, Jr.	Chief Financial Officer
Michael Hammer	Chief Marketing Officer
Brooks Terrell	Chief Technology Officer
David Morris	Chief Services Officer

Heartland Payment Systems, Inc.

The address of the directors is 47 Hulfish Street
Princeton, NJ 08542.

Directors

Robert O. Carr
Martin Uhle
Marc Ostro
Jonathan Palmer
Robert H. Niehaus
Scott L. Bok
Mitchell L. Hollin

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

HEARTLAND PAYMENT SYSTEMS, INC.

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