Current Mail	ing Address:			
	LEY PLACE, SUITE 226 FL 32751 US			
FEI Number: 27-2374202		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
MATTON, GREG 1215 EAST 6TH TAMPA FL 3360	AVENUE			
17.1011 7,112 0000				
	entity submits this statement for the purpose of changing its regist	tered office or regis	tered agent, or both, in the State of Flor	rida.
The above named		tered office or regis	tered agent, or both, in the State of Flor	^{rida.} 04/15/2013
The above named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flor	
The above named	entity submits this statement for the purpose of changing its regist GREGORY E. MATTON Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Floi	04/15/2013
The above named SIGNATURE	entity submits this statement for the purpose of changing its regist GREGORY E. MATTON Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flor	04/15/2013
The above named SIGNATURE Officer/Direc Title	entity submits this statement for the purpose of changing its regist GREGORY E. MATTON Electronic Signature of Registered Agent tor Detail :			04/15/2013
The above named SIGNATURE Officer/Direc Title	entity submits this statement for the purpose of changing its regist GREGORY E. MATTON Electronic Signature of Registered Agent tor Detail : PCEOD	Title	STD	04/15/2013 Date

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000021800

Entity Name: M2 PAYMENT SOLUTIONS, INC.

Current Principal Place of Business:

500 WINDERLEY PLACE, SUITE 226 MAITLAND, FL 32751

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH W. ADAMS

PCEOD

04/15/2013

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 15, 2013 Secretary of State CC1133504046