

PA000041098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**Sunshine State Corporate Compliance Company**

*3458 Lakeshore Drive, Tallahassee, Florida 32312  
(850) 656-4724*

DATE 09/08/2021

**\*\*WALK IN\*\***

ENTITY NAME NET 1 UEPS TECHNOLOGIES, INC

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$35.00

ACCOUNT #: I20160000072

*S R M*

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

Articles of Amendment  
to  
Articles of Incorporation  
of

NET 1 UEPS TECHNOLOGIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P97000041098

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change                      PT            John Doe

☐ Remove                      V            Mike Jones

☐ Add                              SV            Sally Smith

| Type of Action<br>(Check One)                 | Title  | Name             | Address                     |
|-----------------------------------------------|--------|------------------|-----------------------------|
| 1) <input type="checkbox"/> Change            | CEO, D | CHRIS G.B. MEYER | PRESIDENT PLACE 4TH FLOOR   |
| <input checked="" type="checkbox"/> Add       |        |                  | CNR JAN SMUTS AND BOLTON RD |
| <input type="checkbox"/> Remove               |        |                  | ROSEBANK 2195 ZA            |
| 2) <input checked="" type="checkbox"/> Change | CFO, D | ALEX M.R. SMITH  | PRESIDENT PLACE 4TH FLOOR   |
| <input type="checkbox"/> Add                  |        |                  | CNR JAN SMUTS AND BOLTON RD |
| <input type="checkbox"/> Remove               |        |                  | ROSEBANK 2195 ZA            |
| 3) <input type="checkbox"/> Change            | C, D   | JABU A. MABUZA   | PRESIDENT PLACE 4TH FLOOR   |
| <input type="checkbox"/> Add                  |        |                  | CNR JAN SMUTS AND BOLTON RD |
| <input checked="" type="checkbox"/> Remove    |        |                  | ROSEBANK 2195 ZA            |
| 4) <input type="checkbox"/> Change            | D      | NONKU N. GOBODO  | PRESIDENT PLACE 4TH FLOOR   |
| <input checked="" type="checkbox"/> Add       |        |                  | CNR JAN SMUTS AND BOLTON RD |
| <input type="checkbox"/> Remove               |        |                  | ROSEBANK 2195 ZA            |
| 5) <input checked="" type="checkbox"/> Change | C, D   | KUBEN PILLAY     | PRESIDENT PLACE 4TH FLOOR   |
| <input type="checkbox"/> Add                  |        |                  | CNR JAN SMUTS AND BOLTON RD |
| <input type="checkbox"/> Remove               |        |                  | ROSEBANK 2195 ZA            |
| 6) <input type="checkbox"/> Change            |        |                  |                             |
| <input type="checkbox"/> Add                  |        |                  |                             |
| <input type="checkbox"/> Remove               |        |                  |                             |

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(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_  
(voting group)

Dated 9/3/2021 \_\_\_\_\_

Signature A. M. L. C. C.  
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Alex M.R. Smith

\_\_\_\_\_  
(Typed or printed name of person signing)

Chief Financial Officer

\_\_\_\_\_  
(Title of person signing)

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TALLAHASSEE, FL

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