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Michael G. Adams

Kentucky Secretary of State

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COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

MICHAEL G. ADAMS, SECRETARY OF STATE				Received and Filed: 4/10/2024 10:41 AM
Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Authority (Foreign Business Entity)			
Pursuant to the provisions of KRS 14A · and, for that purpose, submits the follow	0 , 1	pplies for authority to transa	ct business in Ken	tucky on behalf of the entity named below
1. The entity is a: profit corpora business true limited partne	st Iimited	rofit corporation d liability company operative association	statutor	ional limited liability company y trust penefit corporation
2. The name of the entity is <u>Apple</u>	ayments Services LL	ssional service corporation	other	
(The a 3. The name of the entity to be used in	name must be identical to the Kentucky is (if applicable):(Or		-) use; otherwise, leave blank.)
4. The state or country under whose law 5. The date of organization is $09/03/2$	v the entity is organized is Dela		ation is perpetu	ial
6. The mailing address of the entity's pr 12545 Riata Vista Circle, M		Austin	ТХ	duration is considered perpetual.)78727
Street Address 7. The street address of the entity's reg 306 West Main Street, Suit		city Frankfort	State	Zip Code 40601
Street Address (No P.O. Box Numbers		City	KY	State Zip Code
and the name of the registered agent at				
8. The names and business addresses Sam Whittington, Manager	12545 Riata Vista Circle, Mailstop 521-APLG	Austin	rs, managers, trus TX	78727
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
 9. If a professional service corporation, a and treasurer are licensed in one or mor statement of purposes of the corporation 10. I certify that, as of the date of filing the service servi	e states or territories of the Unite n. his application, the above-named a limited liability limited partners toox if manager-managed:	ed States or District of Colur I entity validly exists under th	nbia to render a pr ne laws of the juris	
SJW		Sam Whittington, M	lanager	04/04/2024
Signature of Authorized Representative		Printed Name & Title		Date

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "APPLE PAYMENTS SERVICES LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APPLE PAYMENTS SERVICES LLC" WAS FORMED ON THE THIRD DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 203195533 Date: 04-05-24

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SR# 20241334362 You may verify this certificate online at corp.delaware.gov/authver.shtml