

1.) CORPORATION NAME:

Sage Payment Solutions, Inc.

DUE DATE: **3/31/2010**

SCC ID NO: **F1700501**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1750 OLD MEADOW RD STE 200

CITY/ST/ZIP: MCLEAN, VA 22102-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

OFFICER DIRECTOR

NAME: GREG HAMMERMASTER
TITLE: PRESIDENT
ADDRESS: 1750 OLD MEADOW RD, STE 200
CITY/ST/ZIP/CO: MCLEAN, VA 22102-

OFFICER DIRECTOR

NAME: JAMIE KANSKI
TITLE: CFO
ADDRESS: 1750 OLD MEADOW ROAD
STE 200
CITY/ST/ZIP/CO: MCLEAN, VA 22102-

OFFICER DIRECTOR

NAME: PAUL HARRISON
TITLE: DIRECTOR
ADDRESS: NORTH PARK
NEWCASTLE UPON TYNE UK NE139AA
CITY/ST/ZIP/CO: , - ,

OFFICER DIRECTOR

NAME: GUY BERRUYER
TITLE: DIRECTOR
ADDRESS: NORTH PARK
CITY/ST/ZIP/CO: NEWCASTLE UPON TYNE, NE13 9AA-, UNITED KINGDOM (GREAT BRITAIN)

OFFICER DIRECTOR

NAME: BRIAN TRAN
TITLE: ASST SECRETARY
ADDRESS: 6561 IRVINE CENTER DRIVE
CITY/ST/ZIP/CO: IRVINE, VA -

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MELODY WILLIAMS DAPP SECRETARY 6561 IRVINE CENTER DRIVE IRVINE, CA 92618-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT STOCKTON VICE PRESIDENT 6561 IRVINE CENTER DRIVE IRVINE, CA 92618-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUE SWENSON DIRECTOR 6561 IRVINE CENTER DRIVE IRVINE, CA 92618-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ BRIAN TRAN</u>	<u>BRIAN TRAN, ASST SECRETARY</u>	<u>1/6/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.