

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM384798

<b>SUBMISSION TYPE:</b>	RESUBMISSION		
<b>NATURE OF CONVEYANCE:</b>	Declaration Attesting to Release of Security Interest		
<b>RESUBMIT DOCUMENT ID:</b>	900360827		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
American National Bank and Trust Company of Chattanooga		04/08/2016	National Banking Association: UNITED STATES
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Debitek, Inc.		
<b>Street Address:</b>	90 Nassau Street		
<b>Internal Address:</b>	2nd Floor		
<b>City:</b>	Princeton		
<b>State/Country:</b>	NEW JERSEY		
<b>Postal Code:</b>	08542		
<b>Entity Type:</b>	Corporation: DELAWARE		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	1438530	DEBITEK	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	2124552502		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Phone:</b>	(212) 455-3222		
<b>Email:</b>	ksolomon@stblaw.com		
<b>Correspondent Name:</b>	Alexander Raytman, Esq.		
<b>Address Line 1:</b>	Simpson Thacher & Bartlett LLP		
<b>Address Line 2:</b>	425 Lexington Avenue		
<b>Address Line 4:</b>	New York, NEW YORK 10017		
<b>ATTORNEY DOCKET NUMBER:</b>	002513/0001		
<b>NAME OF SUBMITTER:</b>	Alexander Raytman		
<b>SIGNATURE:</b>	/ar/		
<b>DATE SIGNED:</b>	05/18/2016		
<b>Total Attachments: 143</b>			







## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM380478

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	RELEASE OF SECURITY INTEREST		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
American National Bank and Trust Company of Chattanooga		04/08/2016	National Banking Association: UNITED STATES
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Debitek, Inc.		
<b>Street Address:</b>	90 Nassau Street		
<b>Internal Address:</b>	2nd Floor		
<b>City:</b>	Princeton		
<b>State/Country:</b>	NEW JERSEY		
<b>Postal Code:</b>	08542		
<b>Entity Type:</b>	Corporation: DELAWARE		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	1438530	DEBITEK	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	2124552502		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Phone:</b>	(212) 455-3222		
<b>Email:</b>	ksolomon@stblaw.com		
<b>Correspondent Name:</b>	Alexander Raytman, Esq.		
<b>Address Line 1:</b>	Simpson Thacher & Bartlett LLP		
<b>Address Line 2:</b>	425 Lexington Avenue		
<b>Address Line 4:</b>	New York, NEW YORK 10017		
<b>ATTORNEY DOCKET NUMBER:</b>	002513/0001		
<b>NAME OF SUBMITTER:</b>	Alexander Raytman		
<b>SIGNATURE:</b>	/ar/		
<b>DATE SIGNED:</b>	04/13/2016		
<b>Total Attachments: 140</b>			
source=Declaration of Release of Security Interest - American National Bank2 (2)#page1.tif			

CH \$40.00 1438530

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE


Registrant: Debitex, Inc.

Trademark	Registration No.
DEBITEK	1,438,530

DECLARATION ATTESTING TO RELEASE OF SECURITY INTEREST  
TO THE COMMISSIONER FOR TRADEMARKS:

I, Charles Kallenbach, declare and state as follows:

1. I am the Secretary for the above-identified registrant, Debitex, Inc., owner of the above-identified United States trademark registration.
2. A Security Agreement (the "Security Agreement") between the registrant Debitex, Inc. and American National Bank and Trust Company of Chattanooga (the "Agent"), was recorded against the above registrations on June 13, 1988, at Reel No. 0605, Frame No. 0687.
3. The Security Agreement is no longer in effect and all indebtedness underlying the Security Agreement has been completely repaid.

- 
5. Therefore, Debitex, Inc. attests that the Security Agreement is no longer in effect and there is no security interest in place for the benefit of the Agent.

I, the undersigned, being hereby warned that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the registration, declare that the facts set forth in this declaration are true, all statements are made of my own knowledge are true, and all statements made on information and belief are believed to be true.



Charles Kallenbach  
Secretary  
Date: April 8, 2016

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Registrant: Debitex, Inc.

Trademark	Registration No.
DEBITEK	1,438,530

DECLARATION ATTESTING TO RELEASE OF SECURITY INTEREST  
TO THE COMMISSIONER FOR TRADEMARKS:

I, Charles Kallenbach, declare and state as follows:

1. I am the Secretary for the above-identified registrant, Debitex, Inc., owner of the above-identified United States trademark registration.
2. A Security Agreement (the "Security Agreement") between the registrant Debitex, Inc. and American National Bank and Trust Company of Chattanooga (the "Agent"), was recorded against the above registrations on June 13, 1988, at Reel No. 0605, Frame No. 0687.
3. The Security Agreement is no longer in effect and all indebtedness underlying the Security Agreement has been completely repaid.
4. Attached as Exhibit A is a copy of a UCC lien search evidencing that the Agent does not have a security interest recorded against Debitex, Inc.
5. Therefore, Debitex, Inc. attests that the Security Agreement is no longer in effect and there is no security interest in place for the benefit of the Agent.

I, the undersigned, being hereby warned that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the registration, declare that the facts set forth in this declaration are true, all statements are made of my own knowledge are true, and all statements made on information and belief are believed to be true.



Charles Kallenbach  
Secretary  
Date: April 8, 2016

# Delaware

Page 1

The First State

## CERTIFICATE

SEARCHED FEBRUARY 5, 2016 AT 10:41 A.M.  
FOR DEBTOR, DEBITEK, INC.

1 OF 3 FINANCING STATEMENT 20092487855

DEBTOR: EXPIRATION DATE: 08/04/2019  
DEBITEK, INC.

3650 MANSELL RD., SUITE 425 ADDED 08-04-09  
ALPHARETTA, GA 30022

SECURED: JPMORGAN CHASE BANK, N.A.

2200 ROSS AVENUE, 3RD FLOOR ADDED 08-04-09  
DALLAS, TX 75201

## F I L I N G H I S T O R Y

20092487855 FILED 08-04-09 AT 1:29 P.M. FINANCING STATEMENT  
20134161049 FILED 10-23-13 AT 4:42 P.M. TERMINATION  
20140521062 FILED 02-10-14 AT 5:52 A.M. CONTINUATION

2 OF 3 FINANCING STATEMENT 20104140400

DEBTOR: EXPIRATION DATE: 11/24/2020  
DEBITEK, INC.



  
Jeffrey W. Bullock, Secretary of State

20160743801-UCC11  
SR# 20160615166

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201784995  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0044



# Delaware

Page 2

The First State

3650 MANSELL RD., SUITE 425 ADDED 11-24-10

ALPHARETTA, GA 30022

SECURED: JPMORGAN CHASE BANK, N.A., AS ADMINISTRATIVE AGENT

LOAN AND AGENCY SERVICES GROUP, ADDED 11-24-10

10 S. DEARBORN ST., 19TH FL

CHICAGO, IL 60603

## F I L I N G H I S T O R Y

20104140400 FILED 11-24-10 AT 12:30 P.M. FINANCING STATEMENT

20134161437 FILED 10-23-13 AT 4:52 P.M. TERMINATION

20152372158 FILED 06-03-15 AT 11:45 P.M. CONTINUATION

3 OF 3

FINANCING STATEMENT

20134163045

EXPIRATION DATE: 10/23/2018

DEBTOR: DEBITEK, INC.

90 NASSAU STREET, SECOND FLOOR ADDED 10-23-13

PRINCETON, NJ 08542

SECURED: BANK OF AMERICA, N.A., AS ADMINISTRATIVE AGENT

135 S. LASALLE ST., MAIL CODE: ADDED 10-23-13



  
Jeffrey W. Bullock, Secretary of State

20160743801-UCC11  
SR# 20160615166

Authentication: 201784995  
Date: 02-05-16

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

TRADEMARK  
REEL: 005796 FRAME: 0045

# Delaware

Page 3

The First State

IL4-135-09-61

CHICAGO, IL 60603

## F I L I N G   H I S T O R Y

20134163045    FILED 10-23-13    AT 5:53 P.M.    FINANCING STATEMENT

## E N D   O F   F I L I N G   H I S T O R Y

THE UNDERSIGNED FILING OFFICER HEREBY CERTIFIES THAT THE ABOVE LISTING IS A RECORD OF ALL PRESENTLY EFFECTIVE FINANCING STATEMENTS, FEDERAL TAX LIENS AND UTILITY SECURITY INSTRUMENTS FILED IN THIS OFFICE WHICH NAME THE ABOVE DEBTOR, DEBITEK, INC. AS OF JANUARY 15, 2016 AT 11:59 P.M.



  
Jeffrey W. Bullock, Secretary of State

20160743801-UCC11  
SR# 20160615166

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201784995  
Date: 02-05-16

**TRADEMARK**  
**REEL: 005796 FRAME: 0046**

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
 U.C.C. FILING SECTION  
 FILED 01:29 PM 08/04/2009  
 INITIAL FILING # 2009 2487855

SRV: 090751883

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Aaron S. Turner  
 Baker Botts L.L.P.  
 2001 Ross Avenue, Suite 600  
 Dallas, TX 75201

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME  
**Debitek, Inc.**

OR  
 1b. INDIVIDUAL'S LAST NAME

1c. MAILING ADDRESS  
**3650 Mansell Rd., Suite 425**

1d. SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION <b>corporation</b>	1f. JURISDICTION OF ORGANIZATION <b>Delaware</b>	1g. ORGANIZATIONAL ID #, if any <b>2127727</b>	<input type="checkbox"/> NONE
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2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR  
 2b. INDIVIDUAL'S LAST NAME

2c. MAILING ADDRESS

2d. SEE INSTRUCTIONS

ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	<input type="checkbox"/> NONE
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3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME  
**JPMorgan Chase Bank, N.A.**

OR  
 3b. INDIVIDUAL'S LAST NAME

3c. MAILING ADDRESS  
**2200 Ross Avenue, 3rd Floor**

CITY <b>Dallas</b>	STATE <b>TX</b>	POSTAL CODE <b>75201</b>	COUNTRY <b>USA</b>
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4. This FINANCING STATEMENT covers the following collateral:

All assets of the Debtor.

6. ALTERNATIVE DESIGNATION (if applicable):	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
7. THIS FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS. Attach Addendum.	In the REAL (if applicable)	7. Check to REQUEST SEARCH REPORT(s) on Debtor(s) (Additional Fee)	All Debtors	Debtor 1	Debtor 2	

8. OPTIONAL FILER REFERENCE DATA  
 Delaware SOS

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:42 PM 10/23/2013  
INITIAL FILING # 2009 2487855  
AMENDMENT # 2013 4161049  
SRV: 131228388

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

CT Lien Solutions  
PO Box 29071  
Glendale, CA 91209-9071  
Order 40371881

Delaware  
(S.O.S.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
20092487855 08/04/2009

1b.  This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  PARTY INFORMATION CHANGE:  
Check one of these two boxes:  Debtor or  Secured Party of record  
AND Check one of these three boxes to:  CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c  ADD name: Complete item 7a or 7b, and item 7c  DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME Debitek, Inc.

OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR  
7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8.  COLLATERAL CHANGE: Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME JPMorgan Chase Bank, N.A.

OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA: 3165.7103 Debtor: Debitek, Inc.

79918138

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:52 AM 02/10/2014  
INITIAL FILING # 2009 2487855  
AMENDMENT # 2014 0521062  
SRV: 140151622

1a. INITIAL FINANCING STATEMENT FILE # 2009 2487855	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
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2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b; and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects  Debtor *or*  Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
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8. AMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT  
JPMORGAN CHASE BANK, N.A.

10. OPTIONAL FILER REFERENCE DATA  
DE-0-41968734-48213945

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	3027359719
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CAPITOL SERVICES, INC. 615 SOUTH DUPONT HIGHWAY  DOVER DE 19901	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:30 PM 11/24/2010  
INITIAL FILING # 2010 4140400  
SRV: 101120936

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME DEBITEK, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 3650 MANSELL RD., SUITE 425		CITY ALPHARETTA	STATE GA	POSTAL CODE 30022	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME JPMORGAN CHASE BANK, N.A., AS ADMINISTRATIVE AGENT					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS LOAN AND AGENCY SERVICES GROUP, 10 S. DEARBORN ST., CHICAGO		CITY	STATE IL	POSTAL CODE 60603	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All assets of the Debtor now owned or hereafter acquired, and all proceeds thereof.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

002642.2423 - DE - STATE

TRADEMARK  
REEL: 005796 FRAME: 0050

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:52 PM 10/23/2013  
INITIAL FILING # 2010 4140400  
AMENDMENT # 2013 4161437  
SRV: 131228485

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
CT Lien Solutions PO Box 29071 Glendale, CA 91209-9071 Order 40371663
Delaware (S.O.S.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
20104140400 11/24/2010

1b.  This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13.

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  **PARTY INFORMATION CHANGE:**  
Check one of these two boxes:  Debtor or  Secured Party of record  
AND Check one of these three boxes to:  CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c  ADD name: Complete item 7a or 7b, and item 7c  DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME: Debitek, Inc.

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8.  **COLLATERAL CHANGE:** Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME: JPMorgan Chase Bank, N.A., as Administrative Agent

OR

9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA: 3165.7103 Debtor: Debitek, Inc. 79918040

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:45 PM 06/03/2015  
INITIAL FILING # 2010 4140400  
AMENDMENT # 2015 2372158  
SRV: 150876011

1a. INITIAL FINANCING STATEMENT FILE # 2010 4140400	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
--	--

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b; and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects  Debtor *or*  Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
--------------------------	----------------------------------

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT  
JPMORGAN CHASE BANK, N.A., AS ADMINISTRATIVE AGENT

10. OPTIONAL FILER REFERENCE DATA  
DE-0-48302301-50009793



**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:53 PM 10/23/2013  
INITIAL FILING # 2013 4163045

SRV: 131228987

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
CT Lien Solutions
PO Box 29071
Glendale, CA 91209-9071
Order 40372990
Filed In: Delaware (S.O.S.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME <b>Debitek, Inc.</b>				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	<b>90 Nassau Street, Second Floor</b>	CITY <b>Princeton</b>	STATE <b>NJ</b>	POSTAL CODE <b>08542</b>
			COUNTRY <b>USA</b>	

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
			COUNTRY	

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE or ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME <b>Bank of America, N.A., as Administrative Agent</b>				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	<b>135 S. LaSalle St., Mail Code: IL4-135-09-61</b>	CITY <b>Chicago</b>	STATE <b>IL</b>	POSTAL CODE <b>60603</b>
			COUNTRY <b>USA</b>	

4. COLLATERAL: This financing statement covers the following collateral:

All assets of the Debtor now owned or at any time hereafter acquired or in which the Debtor now has or at any time in the future may acquire any interest and all proceeds thereof.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative				
6a. Check <u>only</u> if applicable and check <u>only</u> one box:			6b. Check <u>only</u> if applicable and check <u>only</u> one box:	
<input type="checkbox"/> Public-Finance Transaction	<input type="checkbox"/> Manufactured-Home Transaction	<input type="checkbox"/> A Debtor is a Transmitting Utility	<input type="checkbox"/> Agricultural Lien	<input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor				
8. OPTIONAL FILER REFERENCE DATA: <b>SOS-DE</b>				

79893435

TRADEMARK

# Delaware

Page 1

The First State

## CERTIFICATE

SEARCHED FEBRUARY 5, 2016 AT 3:24 P.M.  
FOR DEBTOR, HEARTLAND PAYMENT SYSTEMS, INC.

1 OF 57 FINANCING STATEMENT 20092487798

DEBTOR: EXPIRATION DATE: 08/04/2019  
HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET, SECOND FLOOR ADDED 08-04-09  
PRINCETON, NJ 08542

SECURED: JPMORGAN CHASE BANK, N.A.

2200 ROSS AVENUE, 3RD FLOOR ADDED 08-04-09  
DALLAS, TX 75201

## F I L I N G H I S T O R Y

20092487798	FILED 08-04-09	AT 1:26 P.M.	FINANCING STATEMENT
20134161387	FILED 10-23-13	AT 4:51 P.M.	TERMINATION
20140521096	FILED 02-10-14	AT 6:06 A.M.	CONTINUATION
20154859368	FILED 10-22-15	AT 3:32 P.M.	TERMINATION

2 OF 57 FINANCING STATEMENT 20092487822

EXPIRATION DATE: 08/04/2019



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0054

# Delaware

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The First State

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET, SECOND FLOOR ADDED 08-04-09

PRINCETON, NJ 08542

**SECURED:** JPMORGAN CHASE BANK, N.A.

2200 ROSS AVENUE, 3RD FLOOR ADDED 08-04-09

DALLAS, TX 75201

## F I L I N G H I S T O R Y

20092487822	FILED 08-04-09	AT 1:28 P.M.	FINANCING STATEMENT
20100644892	FILED 02-25-10	AT 3:54 P.M.	AMENDMENT
20104140442	FILED 11-24-10	AT 12:30 P.M.	AMENDMENT
20134161247	FILED 10-23-13	AT 4:48 P.M.	TERMINATION
20140521054	FILED 02-10-14	AT 5:50 A.M.	CONTINUATION
20154860093	FILED 10-22-15	AT 3:45 P.M.	TERMINATION

3 OF 57

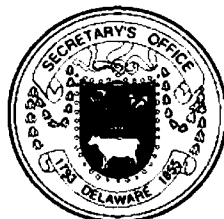
FINANCING STATEMENT


20104140426

EXPIRATION DATE: 11/24/2020

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET ADDED 11-24-10



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

Authentication: 201787672  
Date: 02-05-16

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TRADEMARK  
REEL: 005796 FRAME: 0055

# Delaware

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The First State

PRINCETON, NJ 08542

SECURED: JPMORGAN CHASE BANK, N.A., AS ADMINISTRATIVE AGENT

LOAN AND AGENCY SERVICES GROUP, ADDED 11-24-10

10 S. DEARBORN ST., 19TH FL

CHICAGO, IL 60603

## F I L I N G   H I S T O R Y

20104140426	FILED 11-24-10	AT 12:30 P.M.	FINANCING STATEMENT
20134161353	FILED 10-23-13	AT 4:50 P.M.	TERMINATION
20152372174	FILED 06-03-15	AT 11:47 P.M.	CONTINUATION
20154859582	FILED 10-22-15	AT 3:34 P.M.	TERMINATION

4 OF 57

FINANCING STATEMENT

20110557556

EXPIRATION DATE: 02/15/2016

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 02-15-11

PRINCETON, NJ 08542

SECURED: BANC OF AMERICA LEASING & CAPITAL, LLC

231 SOUTH LASALLE STREET

ADDED 02-15-11



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

Authentication: 201787672  
Date: 02-05-16

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TRADEMARK  
REEL: 005796 FRAME: 0056

# Delaware

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The First State

CHICAGO, IL 60697

## F I L I N G   H I S T O R Y

20110557556      FILED 02-15-11      AT 12:48 P.M.      FINANCING STATEMENT

5 OF 57

LEASE

20111111726

DEBTOR:      EXPIRATION DATE: 03/10/2016  
HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU ST, FL2

ADDED      03-10-11

PRINCETON, NJ 08542

SECURED:      VERIZON CREDIT INC.

201 N. FRANKLIN ST. SUITE 3300

ADDED      03-10-11

TAMPA, FL 33602

## F I L I N G   H I S T O R Y

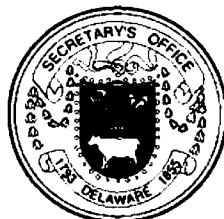
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6 OF 57

FINANCING STATEMENT

20111136822

EXPIRATION DATE: 03/28/2016



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0057

# Delaware

Page 5

The First State

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 03-28-11

PRINCETON, NJ 08542

**SECURED:** BANC OF AMERICA LEASING & CAPITAL, LLC

231 SOUTH LASALLE STREET

ADDED 03-28-11

CHICAGO, IL 60697

## F I L I N G   H I S T O R Y

20111136822      FILED 03-28-11      AT 5:15 P.M.      FINANCING STATEMENT

7 OF 57

FINANCING STATEMENT

2011220758

EXPIRATION DATE: 04/01/2016

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 04-01-11

PLANO, TX 75024

**SECURED:** IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 04-01-11

ARMONK, NY 10504



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0058

# Delaware

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## F I L I N G H I S T O R Y

20111220758 FILED 04-01-11 AT 5:25 P.M. FINANCING STATEMENT

8 OF 57

LEASE

20112296310

EXPIRATION DATE: 06/01/2016

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU ST, FL2

ADDED 06-01-11

PRINCETON, NY 08542

SECURED: VERIZON CREDIT INC.

201 N. FRANKLIN ST. SUITE 3300

ADDED 06-01-11

TAMPA, FL 33602

## F I L I N G H I S T O R Y

20112296310 FILED 06-01-11 AT 10:30 A.M. LEASE

9 OF 57

FINANCING STATEMENT

20112929563

EXPIRATION DATE: 07/28/2016

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 07-28-11



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0059

# Delaware

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PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 07-28-11

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20112929563 FILED 07-28-11 AT 5:14 P.M. FINANCING STATEMENT

10 OF 57

LEASE

20113120832

DEBTOR: EXPIRATION DATE: 07/19/2016  
HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU ST, FL2

ADDED 07-19-11

PRINCETON, NY 08542

SECURED: VERIZON CREDIT INC.

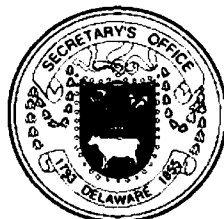
201 N. FRANKLIN ST. SUITE 3300

ADDED 07-19-11

TAMPA, FL 33602

## F I L I N G H I S T O R Y

20113120832 FILED 07-19-11 AT 10:00 A.M. LEASE



  
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20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0060



# Delaware

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FINANCING STATEMENT

20113594499

EXPIRATION DATE: 09/19/2016

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 09-19-11

PRINCETON, NJ 08542

SECURED: BANC OF AMERICA LEASING & CAPITAL, LLC

135 S. LASALLE STREET

ADDED 09-19-11

10TH FLOOR

CHICAGO, IL 60603

## F I L I N G   H I S T O R Y

20113594499    FILED 09-19-11    AT 7:39 P.M.    FINANCING STATEMENT

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FINANCING STATEMENT

20114488527

EXPIRATION DATE: 11/22/2016


DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 11-22-11

PLANO, TX 75024



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

Authentication: 201787672  
Date: 02-05-16

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

TRADEMARK  
REEL: 005796 FRAME: 0061

# Delaware

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**SECURED:** *IBM CREDIT LLC*

*1 NORTH CASTLE DRIVE*

**ADDED** *11-22-11*

*ARMONK, NY 10504*

## F I L I N G H I S T O R Y

*20114488527* **FILED** *11-22-11* **AT** *4:27 P.M.* **FINANCING STATEMENT**

*13 OF 57*

**FINANCING STATEMENT**

*20120218166*

**EXPIRATION DATE:** *01/18/2017*

**DEBTOR:** *HEARTLAND PAYMENT SYSTEMS, INC.*

*6860 DALLAS PKWY 400*

**ADDED** *01-18-12*

*PLANO, TX 75024*

**SECURED:** *IBM CREDIT LLC*

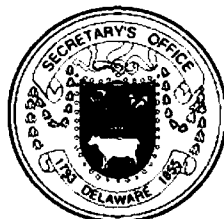
*1 NORTH CASTLE DRIVE*


**ADDED** *01-18-12*

*ARMONK, NY 10504*

## F I L I N G H I S T O R Y

*20120218166* **FILED** *01-18-12* **AT** *3:53 P.M.* **FINANCING STATEMENT**



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

**TRADEMARK**  
**REEL: 005796 FRAME: 0062**

# Delaware

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FINANCING STATEMENT

20121630401

EXPIRATION DATE: 04/26/2017

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 04-26-12

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 04-26-12

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20121630401 FILED 04-26-12 AT 6:26 P.M. FINANCING STATEMENT

15 OF 57

FINANCING STATEMENT

20121923160

EXPIRATION DATE: 05/18/2017

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

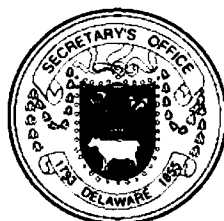
ADDED 05-18-12

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 05-18-12



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0063

# Delaware

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ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20121923160      FILED 05-18-12      AT 12:43 P.M.      FINANCING STATEMENT

16 OF 57      FINANCING STATEMENT

20122792895

EXPIRATION DATE: 07/20/2017

DEBTOR:      HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET, FLOOR 2

ADDED      07-20-12

PRINCETON, NJ 08542

SECURED:      WELLS FARGO BANK, NATIONAL ASSOCIATION, AS LENDER

1525 WEST W.T. HARRIS BLVD., MAI

ADDED      07-20-12

L CODE: NC0680

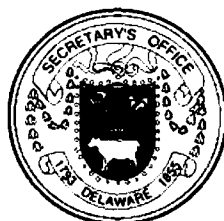
CHARLOTTE, NC 28262

## F I L I N G   H I S T O R Y

20122792895      FILED 07-20-12      AT 10:46 A.M.      FINANCING STATEMENT

17 OF 57      FINANCING STATEMENT

20122869735



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0064

# Delaware

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The First State

**EXPIRATION DATE: 07/25/2017**  
**DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.**

6860 DALLAS PKWY 400

ADDED 07-25-12

PLANO, TX 75024

**SECURED: IBM CREDIT LLC**

1 NORTH CASTLE DRIVE

ADDED 07-25-12

ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20122869735    FILED 07-25-12    AT 5:38 P.M.    FINANCING STATEMENT

18 OF 57

FINANCING STATEMENT

20123402197

**EXPIRATION DATE: 08/31/2017**  
**DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.**

6860 DALLAS PKWY 400

ADDED 08-31-12

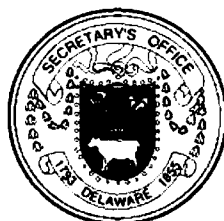
PLANO, TX 75024

**SECURED: IBM CREDIT LLC**

1 NORTH CASTLE DRIVE

ADDED 08-31-12

ARMONK, NY 10504



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

**TRADEMARK**  
**REEL: 005796 FRAME: 0065**

# Delaware

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## F I L I N G   H I S T O R Y

20123402197      FILED 08-31-12      AT 7:57 P.M.      FINANCING STATEMENT

19 OF 57

FINANCING STATEMENT

20123507508

DEBTOR:      EXPIRATION DATE: 09/11/2017  
HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED      09-11-12

PLANO, TX 75024

SECURED:      IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED      09-11-12

ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20123507508      FILED 09-11-12      AT 5:12 P.M.      FINANCING STATEMENT

20 OF 57

FINANCING STATEMENT

20124277481

DEBTOR:      EXPIRATION DATE: 11/06/2017  
HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED      11-06-12



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0066

# Delaware

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PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 11-06-12

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20124277481 FILED 11-06-12 AT 4:20 P.M. FINANCING STATEMENT

21 OF 57

FINANCING STATEMENT

20124543288

EXPIRATION DATE: 11/26/2017

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 11-26-12

PRINCETON, NJ 08542

SECURED: BANC OF AMERICA LEASING & CAPITAL, LLC

135 SOUTH LASALLE STREET

ADDED 11-26-12

10TH FLOOR

CHICAGO, IL 60603

## F I L I N G H I S T O R Y



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0067

# Delaware

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20124543288 FILED 11-26-12 AT 11:12 P.M. FINANCING STATEMENT

22 OF 57

FINANCING STATEMENT

20124940088

EXPIRATION DATE: 12/18/2017

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 12-18-12

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 12-18-12

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20124940088 FILED 12-18-12 AT 5:40 P.M. FINANCING STATEMENT

23 OF 57

FINANCING STATEMENT

20130248444

EXPIRATION DATE: 01/18/2018

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 01-18-13

PLANO, TX 75024



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0068



# Delaware

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**SECURED:** IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 01-18-13

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20130248444 FILED 01-18-13 AT 12:59 P.M. FINANCING STATEMENT

24 OF 57

FINANCING STATEMENT

20130397621

EXPIRATION DATE: 01/30/2018

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 01-30-13

PLANO, TX 75024

**SECURED:** IBM CREDIT LLC

1 NORTH CASTLE DRIVE


ADDED 01-30-13

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20130397621 FILED 01-30-13 AT 3:15 P.M. FINANCING STATEMENT



  
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20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0069

# Delaware

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FINANCING STATEMENT

20131080317

DEBTOR: **EXPIRATION DATE: 03/21/2018**  
**HEARTLAND PAYMENT SYSTEMS, INC.**

6860 DALLAS PKWY 400

ADDED 03-21-13

PLANO, TX 75024

SECURED: **IBM CREDIT LLC**

1 NORTH CASTLE DRIVE

ADDED 03-21-13

ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20131080317    FILED 03-21-13    AT 11:11 A.M.    FINANCING STATEMENT

26 OF 57

FINANCING STATEMENT

20131479469

DEBTOR: **EXPIRATION DATE: 04/17/2018**  
**HEARTLAND PAYMENT SYSTEMS, INC.**

6860 DALLAS PKWY 400

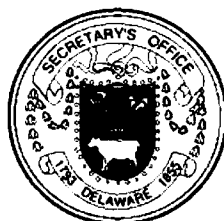
ADDED 04-17-13

PLANO, TX 75024

SECURED: **IBM CREDIT LLC**

1 NORTH CASTLE DRIVE

ADDED 04-17-13



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0070

# Delaware

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ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20131479469      FILED 04-17-13      AT 4:12 P.M.      FINANCING STATEMENT

27 OF 57      FINANCING STATEMENT

20131828368

DEBTOR:      EXPIRATION DATE: 05/13/2018  
HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED      05-13-13

PLANO, TX 75024

SECURED:      IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED      05-13-13

ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20131828368      FILED 05-13-13      AT 6:45 P.M.      FINANCING STATEMENT

28 OF 57      FINANCING STATEMENT

20132290337

EXPIRATION DATE: 06/14/2018



  
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20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0071

# Delaware

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**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 06-14-13

PLANO, TX 75024

**SECURED:** IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 06-14-13

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20132290337 FILED 06-14-13 AT 12:57 P.M. FINANCING STATEMENT

29 OF 57

FINANCING STATEMENT

20132748789

EXPIRATION DATE: 07/17/2018

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 07-17-13

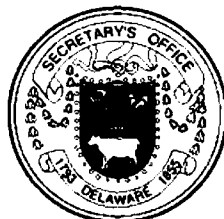
PLANO, TX 75024

**SECURED:** IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 07-17-13

ARMONK, NY 10504



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0072

# Delaware

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## F I L I N G H I S T O R Y

20132748789 FILED 07-17-13 AT 12:41 P.M. FINANCING STATEMENT

30 OF 57

FINANCING STATEMENT

20132991074

EXPIRATION DATE: 08/01/2018

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 08-01-13

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 08-01-13

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20132991074 FILED 08-01-13 AT 10:55 A.M. FINANCING STATEMENT

31 OF 57

FINANCING STATEMENT

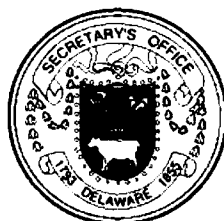
20133007656

EXPIRATION DATE: 08/01/2018

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 08-01-13



  
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20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0073

# Delaware

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PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 08-01-13

ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20133007656    FILED 08-01-13    AT 8:03 P.M.    FINANCING STATEMENT

32 OF 57

FINANCING STATEMENT

20134162765

EXPIRATION DATE: 10/23/2018

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET,

ADDED 10-23-13

SECOND FLOOR

PRINCETON, NJ 08542

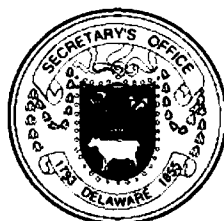
SECURED: BANK OF AMERICA, N.A., AS ADMINISTRATIVE AGENT

135 S. LASALLE ST., MAIL CODE:

ADDED 10-23-13

IL4-135-09-61

CHICAGO, IL 60603



  
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20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0074

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## F I L I N G H I S T O R Y

20134162765 FILED 10-23-13 AT 5:44 P.M. FINANCING STATEMENT

20156363062 FILED 12-31-15 AT 12:20 P.M. AMENDMENT

33 OF 57

FINANCING STATEMENT

20134478070

EXPIRATION DATE: 11/13/2018

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 11-13-13

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 11-13-13

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20134478070 FILED 11-13-13 AT 5:09 P.M. FINANCING STATEMENT

34 OF 57

FINANCING STATEMENT

20134627940

EXPIRATION DATE: 11/22/2018

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.



  
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SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0075

# Delaware

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6860 DALLAS PKWY 400

ADDED 11-22-13

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 11-22-13

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20134627940 FILED 11-22-13 AT 5:12 P.M. FINANCING STATEMENT

35 OF 57

FINANCING STATEMENT

20135109161

EXPIRATION DATE: 12/24/2018

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 12-24-13

PLANO, TX 75024

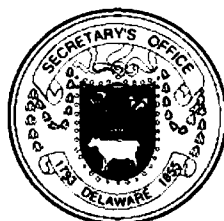
SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 12-24-13

ARMONK, NY 10504

## F I L I N G H I S T O R Y



  
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SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0076



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20135109161 FILED 12-24-13 AT 2:14 P.M. FINANCING STATEMENT

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FINANCING STATEMENT

20140159004

DEBTOR: EXPIRATION DATE: 01/13/2019  
HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 01-13-14

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 01-13-14

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20140159004 FILED 01-13-14 AT 5:13 P.M. FINANCING STATEMENT

37 OF 57

FINANCING STATEMENT

20140416560

DEBTOR: EXPIRATION DATE: 01/31/2019  
HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 01-31-14

PLANO, TX 75024



  
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SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0077

# Delaware

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**SECURED:** *IBM CREDIT LLC*

*1 NORTH CASTLE DRIVE*

**ADDED** *01-31-14*

*ARMONK, NY 10504*

## F I L I N G H I S T O R Y

*20140416560* **FILED** *01-31-14* **AT** *3:56 P.M.* **FINANCING STATEMENT**

*38 OF 57*

**FINANCING STATEMENT**

*20140807008*

**EXPIRATION DATE:** *03/03/2019*

**DEBTOR:** *HEARTLAND PAYMENT SYSTEMS, INC.*

*90 NASSAU STREET*

**ADDED** *03-03-14*

*PRINCETON, NJ 08542*

**SECURED:** *FORSYTHE/MCARTHUR ASSOCIATES, INC.*

*7770 FRONTAGE RD.*

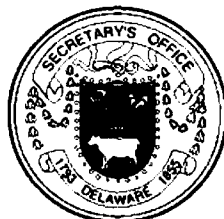
**ADDED** *03-03-14*

*SKOKIE, IL 60077*

## F I L I N G H I S T O R Y

*20140807008* **FILED** *03-03-14* **AT** *5:24 P.M.* **FINANCING STATEMENT**

*20140859264* **FILED** *03-05-14* **AT** *6:28 P.M.* **AMENDMENT**



  
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20160757989-UCC11  
SR# 20160627264

Authentication: 201787672  
Date: 02-05-16

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**TRADEMARK**  
**REEL: 005796 FRAME: 0078**

# Delaware

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FINANCING STATEMENT

20141227131

EXPIRATION DATE: 03/28/2019

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 03-28-14

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 03-28-14

ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20141227131 FILED 03-28-14 AT 4:49 P.M. FINANCING STATEMENT

40 OF 57

FINANCING STATEMENT

20141284322

EXPIRATION DATE: 04/01/2019

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 04-01-14

PLANO, TX 75024

SECURED: IBM CREDIT LLC



  
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20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0079

# Delaware

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1 NORTH CASTLE DRIVE

ADDED 04-01-14

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20141284322 FILED 04-01-14 AT 7:02 P.M. FINANCING STATEMENT

41 OF 57

FINANCING STATEMENT

20141494137

EXPIRATION DATE: 04/16/2019

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 04-16-14

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 04-16-14

ARMONK, NY 10504

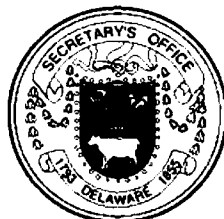
## F I L I N G H I S T O R Y

20141494137 FILED 04-16-14 AT 11:04 A.M. FINANCING STATEMENT

42 OF 57

FINANCING STATEMENT

20142464519



  
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20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0080

# Delaware

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**DEBTOR:**                    *EXPIRATION DATE: 06/23/2019*  
*HEARTLAND PAYMENT SYSTEMS, INC.*

*6860 DALLAS PARKWAY #400*                    *ADDED 06-23-14*  
*PLANO, TX 75024*

**SECURED:**                *CIT FINANCE LLC*

*10201 CENTURION PARKWAY NORTH, S*                    *ADDED 06-23-14*  
*UITE 100*  
*JACKSONVILLE, FL 32256*

## F I L I N G   H I S T O R Y

*20142464519*                *FILED 06-23-14*                *AT 3:54 P.M.*                *FINANCING STATEMENT*

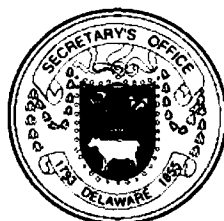
*43 OF 57*                    *FINANCING STATEMENT*                    *20142660157*

**DEBTOR:**                    *EXPIRATION DATE: 07/07/2019*  
*HEARTLAND PAYMENT SYSTEMS, INC.*

*6860 DALLAS PKWY 400*                    *ADDED 07-07-14*  
*PLANO, TX 75024*

**SECURED:**                *IBM CREDIT LLC*

*1 NORTH CASTLE DRIVE*                    *ADDED 07-07-14*



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

**TRADEMARK**  
**REEL: 005796 FRAME: 0081**

# Delaware

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ARMONK, NY 10504

## F I L I N G   H I S T O R Y

20142660157      FILED 07-07-14      AT 12:01 P.M.      FINANCING STATEMENT

44 OF 57      FINANCING STATEMENT

20143416211

DEBTOR:      EXPIRATION DATE: 08/26/2019  
HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU ST

ADDED      08-26-14

PRINCETON, NJ 08542

SECURED:      APPLE FINANCIAL SERVICES

PO BOX 35701

ADDED      08-26-14

BILLINGS, MT 59107-570

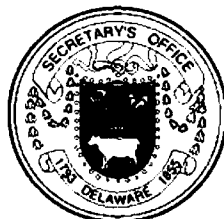
## F I L I N G   H I S T O R Y

20143416211      FILED 08-26-14      AT 11:15 A.M.      FINANCING STATEMENT

45 OF 57      FINANCING STATEMENT

20150386804

EXPIRATION DATE: 01/28/2020



  
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20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0082

# Delaware

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**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 01-28-15

PLANO, TX 75024

**SECURED:** IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 01-28-15

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20150386804 FILED 01-28-15 AT 4:16 P.M. FINANCING STATEMENT

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FINANCING STATEMENT

20150439223

EXPIRATION DATE: 02/02/2020

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 02-02-15

PLANO, TX 75024

**SECURED:** IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 02-02-15

ARMONK, NY 10504



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0083

# Delaware

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## F I L I N G H I S T O R Y

20150439223 FILED 02-02-15 AT 9:46 A.M. FINANCING STATEMENT

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FINANCING STATEMENT

20150439272

EXPIRATION DATE: 02/02/2020

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

6860 DALLAS PKWY 400

ADDED 02-02-15

PLANO, TX 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 02-02-15

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20150439272 FILED 02-02-15 AT 9:46 A.M. FINANCING STATEMENT

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FINANCING STATEMENT

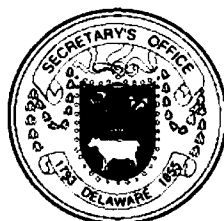
20150524776

EXPIRATION DATE: 02/05/2020

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 02-05-15



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0084



# Delaware

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NEW JERSEY, NJ 08542

SECURED: BANC OF AMERICA LEASING & CAPITAL, LLC

135 S. LASALLE STREET

ADDED 02-05-15

IL4-135-10-61

CHICAGO, IL 60603

## F I L I N G H I S T O R Y

20150524776 FILED 02-05-15 AT 5:42 P.M. FINANCING STATEMENT

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FINANCING STATEMENT

20150843556

EXPIRATION DATE: 02/27/2020

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 02-27-15

PRINCETON, NJ 75024

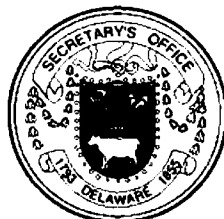
SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 02-27-15

ARMONK, NY 10504

## F I L I N G H I S T O R Y



  
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SR# 20160627264

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Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0085

# Delaware

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20150843556 FILED 02-27-15 AT 7:08 P.M. FINANCING STATEMENT

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FINANCING STATEMENT

20150915834

EXPIRATION DATE: 03/04/2020

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 03-04-15

PRINCETON, NJ 75024

SECURED: IBM CREDIT LLC

1 NORTH CASTLE DRIVE

ADDED 03-04-15

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20150915834 FILED 03-04-15 AT 5:17 P.M. FINANCING STATEMENT

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FINANCING STATEMENT

20152679628

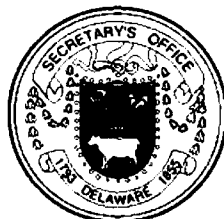
EXPIRATION DATE: 06/23/2020

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU ST

ADDED 06-23-15

PRINCETON, NJ 08542-452



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0086

# Delaware

Page 34

The First State

**SECURED:** **APPLE FINANCIAL SERVICES**

**PO BOX 35701**

**ADDED 06-23-15**

**BILLINGS, MT 59107-570**

## F I L I N G H I S T O R Y

**20152679628 FILED 06-23-15 AT 11:11 A.M. FINANCING STATEMENT**

**52 OF 57**

**FINANCING STATEMENT**

**20153247987**

**EXPIRATION DATE: 07/28/2020**

**DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.**

**90 NASSAU STREET, ""**

**ADDED 07-28-15**

**PRINCETON, NJ 75024**

**SECURED: IBM CREDIT LLC**

**ONE NORTH CASTLE DRIVE, ""**

**ADDED 07-28-15**

**ARMONK, NY 10504**

## F I L I N G H I S T O R Y

**20153247987 FILED 07-28-15 AT 8:37 A.M. FINANCING STATEMENT**



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

**TRADEMARK**  
**REEL: 005796 FRAME: 0087**

# Delaware

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The First State

53 OF 57

FINANCING STATEMENT

20153275343

EXPIRATION DATE: 07/29/2020

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU ST

ADDED 07-29-15

PRINCETON, NJ 08542

SECURED: APPLE FINANCIAL SERVICES

PO BOX 35701

ADDED 07-29-15

BILLINGS, MT 59107

## F I L I N G H I S T O R Y

20153275343 FILED 07-29-15 AT 11:17 A.M. FINANCING STATEMENT

54 OF 57

FINANCING STATEMENT

20154590708

EXPIRATION DATE: 10/08/2020

DEBTOR: HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

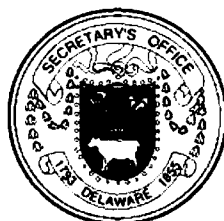
ADDED 10-08-15

NEW JERSEY, NJ 08542

SECURED: FORSYTHE/MCARTHUR ASSOCIATES, INC.

7770 FRONTAGE ROAD

ADDED 10-08-15



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0088

# Delaware

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The First State

SKOKIE, IL 60077

## F I L I N G   H I S T O R Y

20154590708      FILED 10-08-15      AT 5:20 P.M.      FINANCING STATEMENT

55 OF 57

FINANCING STATEMENT

20154590716

EXPIRATION DATE: 10/08/2020

DEBTOR:      HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED      10-08-15

NEW JERSEY, NJ 08542

SECURED:      FORSYTHE/MCARTHUR ASSOCIATES, INC.

7770 FRONTAGE ROAD

ADDED      10-08-15

SKOKIE, IL 60077

## F I L I N G   H I S T O R Y

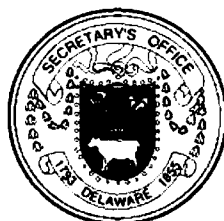
20154590716      FILED 10-08-15      AT 5:20 P.M.      FINANCING STATEMENT

56 OF 57

FINANCING STATEMENT

20154596127

EXPIRATION DATE: 10/09/2020



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0089

# Delaware

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The First State

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 10-09-15

PRINCETON, NJ 75024

**SECURED:** IBM CREDIT LLC

ONE NORTH CASTLE DRIVE

ADDED 10-09-15

ARMONK, NY 10504

## F I L I N G H I S T O R Y

20154596127 FILED 10-09-15 AT 9:00 A.M. FINANCING STATEMENT

57 OF 57

FINANCING STATEMENT

20156166754

EXPIRATION DATE: 12/21/2020

**DEBTOR:** HEARTLAND PAYMENT SYSTEMS, INC.

90 NASSAU STREET

ADDED 12-21-15

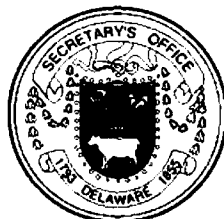
PRINCETON, NJ 75024

**SECURED:** IBM CREDIT LLC

ONE NORTH CASTLE DRIVE

ADDED 12-21-15

ARMONK, NY 10504



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0090

# Delaware

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The First State


## F I L I N G   H I S T O R Y

20156166754      FILED 12-21-15      AT 9:01 A.M.      FINANCING STATEMENT

## E N D   O F   F I L I N G   H I S T O R Y

THE UNDERSIGNED FILING OFFICER HEREBY CERTIFIES THAT THE ABOVE LISTING IS A RECORD OF ALL PRESENTLY EFFECTIVE FINANCING STATEMENTS, FEDERAL TAX LIENS AND UTILITY SECURITY INSTRUMENTS FILED IN THIS OFFICE WHICH NAME THE ABOVE DEBTOR, HEARTLAND PAYMENT SYSTEMS, INC. AS OF JANUARY 15, 2016 AT 11:59 P.M.



  
Jeffrey W. Bullock, Secretary of State

20160757989-UCC11  
SR# 20160627264

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201787672  
Date: 02-05-16

TRADEMARK  
REEL: 005796 FRAME: 0091

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
 U.C.C. FILING SECTION  
 FILED 01:26 PM 08/04/2009  
 INITIAL FILING # 2009 2487798

SRV: 090751864

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Aaron S. Turner  
 Baker Botts L.L.P.  
 2001 Ross Avenue, Suite 600  
 Dallas, TX 75201

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME  
**Heartland Payment Systems, Inc.**

OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**90 Nassau Street, Second Floor Princeton NJ 08542 USA**

14. SEE INSTRUCTIONS ADDL INFO RE ORGANIZATION DEBTOR 1a. TYPE OF ORGANIZATION 1b. JURISDICTION OF ORGANIZATION 1c. ORGANIZATIONAL ID #, if any  
**corporation Delaware 3248384**  NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

24. SEE INSTRUCTIONS ADDL INFO RE ORGANIZATION DEBTOR 2a. TYPE OF ORGANIZATION 2b. JURISDICTION OF ORGANIZATION 2c. ORGANIZATIONAL ID #, if any  
 NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR(S)) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME  
**JPMorgan Chase Bank, N.A.**

OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**2200 Ross Avenue, 3rd Floor Dallas TX 75201 USA**

4. This FINANCING STATEMENT covers the following collateral:

**All of the Debtor's right, title and interest in and to the following Commercial Tort Claims:**

**Heartland Payment Systems, Inc. v. Global Payment Systems, MER-L-739-08, Superior Court of New Jersey;**

**Heartland Payment Systems, Inc. v. Elizabeth Player, Michael Lawson, Musical Events LLC, MER-L-185009, Superior Court of New Jersey; and**

**Heartland Payment Systems, Inc. v. Micros Systems, Inc., Merchant Link, LLC, and Chase Paymentech Solutions, LLC, 3:07-CV-05629, District Court of New Jersey.**

5. ALTERNATIVE DESIGNATION (if applicable):  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum. 7. Check to REQUEST SEARCH REPORT (a) on Debtor(s) (optional) (b) on All Debtors (c) Debtor 1 (d) Debtor 2 (optional) (e) ADDITIONAL FEE (optional)

8. OPTIONAL FILER REFERENCE DATA

**Delaware SOS**

FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02) International Association of Commercial Administrators (IACA)



**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:51 PM 10/23/2013  
INITIAL FILING # 2009 2487798  
AMENDMENT # 2013 4161387  
SRV: 131228474

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
CT Lien Solutions
PO Box 29071
Glendale, CA 91209-9071
Order 40371808
Delaware (S.O.S.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
20092487798 08/04/2009

1b.  This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  PARTY INFORMATION CHANGE:  
Check one of these two boxes:  Debtor or  Secured Party of record  
AND Check one of these three boxes to:  CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c  ADD name: Complete item 7a or 7b, and item 7c  DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME: Heartland Payment Systems, Inc.

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
---------------------	------	-------	-------------	---------

8.  COLLATERAL CHANGE: Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME: JPMorgan Chase Bank, N.A.

OR

9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

10. OPTIONAL FILER REFERENCE DATA: 3165.7103 Debtor: Heartland Payment Systems, Inc. 79917333

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 06:06 AM 02/10/2014  
INITIAL FILING # 2009 2487798  
AMENDMENT # 2014 0521096  
SRV: 140151625

1a. INITIAL FINANCING STATEMENT FILE # 2009 2487798	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
--	--

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
--------------------------	----------------------------------

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT  
JPMORGAN CHASE BANK, N.A.

10. OPTIONAL FILER REFERENCE DATA  
DE-0-41968738-48213951

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>Jon C. Sims</b> <b>Jenner &amp; Block LLP</b> <b>353 N. Clark Street</b> <b>Chicago, Illinois 60654-3456</b>

Delaware Department of State  
U.C.C. Filing Section  
Filed: 03:32 PM 10/22/2015  
U.C.C. Initial Filing No: 2009 2487798  
Amendment No: 20154859368  
Service Request No: 20150609138

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
**2009 2487798 filed 08/04/2009**

1b.  This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3.  **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8
4.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law
5.  **PARTY INFORMATION CHANGE:**  
Check one of these two boxes:  Debtor or  Secured Party of record  
**AND** Check one of these three boxes to:  
 CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c  
 ADD name: Complete item 7a or 7b, and item 7c  
 DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
---------------------	------	-------	-------------	---------

8.  **COLLATERAL CHANGE:** Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a **DEBTOR**, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME <b>JPMorgan Chase Bank, N.A.</b>				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**  
**Filed with the Delaware Secretary of State**

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
 U.C.C. FILING SECTION  
 FILED 01:28 PM 08/04/2009  
 INITIAL FILING # 2009 2487822

SRV: 090751874

A. NAME & PHONE OF CONTACT AT FILER [optional]

---

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Aaron S. Turner**  
**Baker Botts L.L.P.**  
**2001 Ross Avenue, Suite 600**  
**Dallas, TX 75201**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

1a. ORGANIZATION'S NAME			
<b>Heartland Payment Systems, Inc.</b>			
OR	1b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS			
<b>90 Nassau Street, Second Floor</b>		<b>Princeton</b>	<b>USA</b>
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION
		<b>corporation</b>	<b>Delaware</b>
1g. ORGANIZATIONAL ID #, if any			<input type="checkbox"/> NONE
<b>3248384</b>			

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

2a. ORGANIZATION'S NAME			
OR	2b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS			
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION
2g. ORGANIZATIONAL ID #, if any			<input type="checkbox"/> NONE

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)**

3a. ORGANIZATION'S NAME			
<b>JPMorgan Chase Bank, N.A.</b>			
OR	3b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS			
<b>2200 Ross Avenue, 3rd Floor</b>		<b>Dallas</b>	<b>USA</b>

**4. This FINANCING STATEMENT covers the following collateral:**

**All assets of the Debtor.**

5. ALTERNATIVE DESIGNATION (if applicable):	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/SAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. THIS FINANCING STATEMENT IS TO BE FILED (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Address (if applicable)	7. Check to REQUEST SEARCH REPORT(s) on Debtor(s) (ADDITIONAL FEE)		All Debtors Debtor 1 Debtor 2			

**8. OPTIONAL FILER REFERENCE DATA**

**Delaware SOS**



DELAWARE DEPARTMENT OF STATE  
 U.C.C. FILING SECTION  
 FILED 03:54 PM 02/25/2010  
 INITIAL FILING # 2009 2487822  
 AMENDMENT # 2010 0644892  
 SRV: 100209826

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

---

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

After Filing Return To:  
 CT Lien Solutions  
 Attn: Ted Mulligan  
 4400 Easton Commons Way, Suite 125  
 Columbus Ohio 43219

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. SERIAL FINANCING STATEMENT FILE #  
**2009 2487822**

1a. THE FINANCING STATEMENT AMENDMENT is to be filed (for record) (for recording) in the REAL ESTATE RECORDS

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  **ASSIGNMENT (full or partial):** Give name of assignee in Item 7a or 7b and address of assignee in Item 7c and also give name of assignor in Item 8.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in Items 6 and/or 7.  
 **CHANGE name and/or address:** Please refer to the detailed instructions in respect to changing the name/address of a party.  
 **DELETE name:** Give record name to be deleted in Item 6a or 6b.  
 **ADDRESS:** Complete Item 7a or 7b, and also Item 7c; also complete Item 7d, if applicable.

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

7c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

7d. SEE INSTRUCTIONS ADDL INFO RE ORGANIZATION DEBTOR 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any  NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.  
 Describe collateral  deleted or  added, or give entire  revised collateral description, or describe collateral  assigned.

Debtor's interest in and to the property described in Exhibit A attached hereto.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignee, if this is an Assignment; if this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here  and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME  
**JPMorgan Chase Bank, N.A.**

OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

10. **OPTIONAL FILER REFERENCE DATA**  
 Delaware Secretary of State 002642.2423 T.M. 7778943

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (FORM UCC9) (REV. 05/22/02) International Association of Commercial Administrators (IACA)

## Exhibit A

### Deleted Collateral

(a) Improvements. All right, title and interest of the Debtor in the buildings, structures, improvements, additions, enlargements, extensions, modifications, repairs and replacements thereto, in each case as now or hereafter erected or located on the property described on Exhibit A hereto (such property is referred to herein as the "Land") (collectively, the "Improvements");

(b) Fixtures and Equipment. All "fixtures" (as defined in Article 9 of the Uniform Commercial Code, as adopted and in effect in the state in which the Land is located (the "Uniform Commercial Code")) and all "equipment" (as defined in Article 9 of the Uniform Commercial Code) now owned, or the ownership of which is hereafter acquired, by the Debtor and which are used solely in connection with the ownership or occupation of the Land and the Improvements and not in connection with the operation of the business of the Debtor, including, without limitation, all building or construction materials intended for construction, reconstruction, alteration or repair of or installation on the Land or the Improvements, construction equipment, appliances, machinery, conduits, compressors, vacuum cleaning systems, floor cleaning, waxing and polishing equipment, brackets, electrical signs, conveyors, cabinets, lockers, shelving, and spotlighting equipment, fittings, engines, motors, devices for the operation of pumps, pipes, plumbing systems and equipment, cleaning systems and equipment, call and sprinkler systems and equipment, fire extinguishing systems and equipment, heating and ventilating systems and equipment, laundry facilities and equipment, incinerators, electrical systems and equipment, air conditioning and air cooling systems and equipment, pollution control equipment, security systems, disposals, dishwashers, refrigerators, stoves and ranges, recreational equipment and facilities of all kinds, elevators, escalators, all equipment installed or used in the operation of the day care facility, and water, gas, electrical, storm and sanitary sewer facilities, utility lines and equipment (whether owned individually or jointly with others, and, if owned jointly, to the extent of the Debtor's interest therein) and all other utilities whether or not situated in easements, all water tanks, water supply, water power sites, fuel stations, fuel tanks, fuel supply systems and equipment, and any other property of a similar nature to any of the foregoing property, together with all accessions, appurtenances, additions, replacements, betterments and substitutions for any of the foregoing and the proceeds thereof (collectively, the "Fixtures and Equipment");

(c) Leases and Rents. All leases, subleases or subsubleases, lettings, licenses, concessions or other agreements (whether written or oral and whether now or hereafter in effect) pursuant to which any Person is granted a possessory interest in, or right to use or occupy all or any portion of any space in any of the Land or the Improvements, and every modification, amendment or other agreement relating to such lease, sublease, subsublease and every guarantee of the performance and observance of the covenants, conditions and agreements to be performed and observed by the other party thereto (collectively, the "Leases"), whether before or after the filing by or against the Debtor of any petition for relief under 11 U.S.C. §101 et seq., as the same may be amended from time to time (the "Bankruptcy Code") and all right, title and interest of the Debtor, its successors and assigns therein and thereunder, including, without limitation, letters of credit, cash or securities deposited thereunder to secure the performance by the lessees

of their obligations thereunder and all rents, rent equivalents, moneys payable as damages or in lieu of rent or rent equivalents, royalties (including all oil and gas or other mineral royalties and bonuses), income, receivables, receipts, revenues, deposits (including security, utility and other deposits), accounts, accounts receivable, cash, issues, profits, gross revenues, and other consideration of whatever form or nature received by or paid to or for the account of or benefit of the Debtor from any and all sources arising from or attributable solely to the ownership or occupation of the Land, the Improvements, or the Fixtures and Equipment and not arising from or attributable to the business of the Debtor (collectively, the "Rents") and all proceeds from the sale or other disposition of the Leases and the right to receive and apply the Rents to the payment of the Secured Obligations;

(d) Condemnation Awards. All right, title and interest of the Debtor in and to all claims, entitlements, judgments, damages, awards, settlements, compensation and payments, including interest thereon, which may heretofore and hereafter be made with respect to the Land, the Improvements, or the Fixtures and Equipment or any portion thereof (including interest thereon) heretofore or hereafter accruing or made to or for the benefit of the present and all subsequent owners of the Land, the Improvements or the Fixtures and Equipment, whether from the exercise of the right of eminent domain (including but not limited to any transfer made in lieu of or in anticipation of the exercise of the right), or for a change of grade of streets, or for any other injury to or decrease in the value of the Land, the Improvements or the Fixtures and Equipment;

(e) Insurance Proceeds. All right, title and interest of the Debtor in and to unearned premiums, accrued, accruing or to accrue under casualty insurance policies now or hereafter obtained by the Debtor and covering any of the Land, the Improvements or the Fixtures and Equipment, including the proceeds of the conversion, voluntary or involuntary, of any of the foregoing property into cash or other liquidated claims, including proceeds of hazard, title and other insurance covering the foregoing property or any portion thereof, including, without limitation, the right to receive and apply the proceeds of any such insurance, judgments, or settlements made in lieu thereof, for damage to such property;

(f) Tax Certiorari. All right, title and interest of the Debtor in and to all refunds, rebates or credits in connection with reduction in real estate taxes and assessments charged against the Land, Improvements or the Fixtures and Equipment as a result of tax certiorari or any applications or proceedings for reduction;

(g) Permits and Agreements. To the extent assignable, all right, title and interest of the Debtor in and to all agreements, contracts, certificates, franchises, permits, licenses, plans, specifications and similar documents including, without limitation, "contract rights" and "general intangibles," as such terms are defined in Article 9 of the Uniform Commercial Code, now or hereafter entered into, and all rights therein and thereto, now owned, or the ownership of which is hereafter acquired, by the Debtor and which are used solely in connection with the ownership or occupation of the Land, the Improvements or the Fixtures and Equipment and not in connection with the operation of the business of the Debtor, and all right, title and interest of the Debtor therein and thereunder (collectively, the "Permits and Agreements");

(h) Books and Records. All right, title and interest of the Debtor in and to all books and records, including electronic records, relating solely to the ownership or occupation of the Land, the Improvements or the Fixtures and Equipment and not in connection with the operation of the business of the Debtor, and all books and record, including electronic records, relating solely to the Permits and Agreements; and

(i) Proceeds. All proceeds, products or substitutions of or for any of the foregoing.



**EXHIBIT A**

**LEGAL DESCRIPTION OF THE LAND**

The following is a legal description prepared this 17<sup>th</sup> day of February, 2006, of real property being a part of Survey #14 of the Illinois Grant, Utica Township, Clark County, Indiana, being depicted in a survey by Paul Primavera & Associates, Job No. 05-10450, more particularly described as follows:

Commencing at the North corner of said Survey #14; thence along the Northwest line of said Survey #14 South 54° 35' 43" West 813.21 feet to the East corner of said Survey #23; thence continuing South 54° 35' 43" West 74.58 feet to the Southwesterly right-of-way line of Centennial Boulevard; thence along said right-of-way as follows: along a non-tangent curve to the right (said curve having a radius of 670.00 feet, a chord bearing South 49° 10' 33" East, and a chord length of 498.08 feet) a distance of 510.33 feet; thence South 27° 21' 20" East 94.18 feet; thence along a tangent curve to the right (said curve having a radius of 30.00 feet, a chord bearing South 18° 07' 00" West, and a chord length of 42.08 feet) a distance of 46.64 feet; thence South 63° 35' 21" West 39.50 feet; thence South 26° 24' 39" East 60.00 feet; thence North 63° 35' 21" East 40.49 feet; thence along a tangent curve to the right (said curve having a radius of 30.00 feet, a chord bearing South 71° 53' 00" East, and a chord length of 42.78 feet) a distance of 47.63 feet; thence South 27° 21' 20" East 97.54 feet; thence along a tangent curve to the right (said curve having a radius of 1970.00 feet, a chord bearing South 17° 29' 58" East, and a chord length of 674.44 feet) a distance of 677.78 feet to a Jacobi, Toombs, and Lanz pin and cap at the East corner of that property conveyed to WBW Real Estate, LLC, in Instrument #200521211 and the point of beginning; thence continuing on a curve to the right (said curve having a radius of 1970.00 feet, a chord bearing South 00° 19' 39" East, and a chord length of 501.68 feet) a distance of 503.05 feet to a #5 reinforcing bar with a yellow plastic cap stamped "Primavera & Assoc. #0049", hereinafter this type of monument is referred to as a capped reinforcing bar; thence along a tangent curve to the right (said curve having a radius of 30.00 feet, a chord bearing South 52° 26' 21" West, and a chord length of 42.43 feet) a distance of 47.13 feet to a capped reinforcing bar; thence North 82° 34' 10" West 39.99 feet to a capped reinforcing bar; thence South 07° 25' 50" West 60.00 feet to a capped reinforcing bar; thence South 82° 34' 10" East 38.61 feet to a capped reinforcing bar; thence along a tangent curve to the right (said curve having a radius of 30.00 feet, a chord bearing South 36° 26' 16" East, and a chord length of 41.61 feet) a distance of 45.98 feet; thence South 09° 41' 43" West 146.95 feet to a capped reinforcing bar; thence along a tangent curve to the left (said curve having a radius of 662.62 feet, a chord bearing South 11° 52' 04" East, and a chord length of 487.06 feet) a distance of 498.75 feet to a capped reinforcing bar; thence South 33° 25' 51" East 291.35

(continued on following page)

**EXHIBIT A**

**LEGAL DESCRIPTION OF THE LAND**

(continued from previous page)

feet to a capped reinforcing bar; thence leaving said right-of-way North 54° 52' 12" East 26.58 feet; thence South 35° 02' 26" East 291.42 feet; thence South 56° 38' 45" West 21.35 feet to a capped reinforcing bar; thence South 20° 29' 41" East 59.96 feet; thence South 32° 54' 41" East 268.85 feet; thence South 08° 04' 47" East 105.63 feet; thence South 23° 03' 58" West 84.57 feet; thence South 23° 04' 45" West 53.43 feet; thence South 22° 27' 07" West 54.46 feet; thence South 23° 32' 26" West 54.27 feet; thence South 25° 28' 29" West 10.26 feet; thence South 54° 27' 35" West 33.66 feet to a capped reinforcing bar; thence South 33° 20' 49" East 16.52 feet to that property conveyed to the State of Indiana in Deed Drawer 14, Instrument 7253; thence along the Northwest line of said property South 54° 04' 58" West 147.82 feet to a capped reinforcing bar on the northeasterly right-of-way of Port Road; thence along said right-of-way as follows: North 42° 51' 36" West 845.83 feet to a capped reinforcing bar; thence along a tangent curve to

the right (said curve having a radius of 2774.96 feet, a chord bearing North 37° 45' 04" West, and a chord length of 494.28 feet) a distance of 494.93 feet to a capped reinforcing bar; thence North 19° 09' 47" West 391.19 feet to a capped reinforcing bar; thence North 32° 29' 21" West 302.03 feet to a capped reinforcing bar; thence North 25° 50' 08" West 328.61 feet to a capped reinforcing bar; thence along a tangent curve to the left (said curve having a radius of 1366.28 feet, a chord length of 37.33 feet) a distance of 37.33 feet to a Jacobi, Toombs, and Lanz pin and cap at the South corner of that property conveyed to WBW Real Estate, LLC, in Instrument #200521211; thence along the Southeast line of said property North 63° 21' 03" East 1111.71 feet to the point of beginning, containing 35.728 Acres, more or less.

Being a part of those properties conveyed to North Port Development Corporation in Deed Drawer 27, Instrument 8795, Deed Drawer 29, Instrument 17322, and Deed Drawer 29, Instrument 17323.

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	3027359719
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CAPITOL SERVICES, INC.	
615 SOUTH DUPONT HIGHWAY	
DOVER DE 19901	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:30 PM 11/24/2010  
INITIAL FILING # 2009 2487822  
AMENDMENT # 2010 4140442  
SRV: 101120940

1a. INITIAL FINANCING STATEMENT FILE # 2009 2487822	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
--	--

2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
--------------------------	----------------------------------

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

**All assets of the Debtor now owned or hereafter acquired, and all proceeds thereof.**

9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT  
JPMorgan Chase Bank, N.A.

10. OPTIONAL FILER REFERENCE DATA  
002642.2423 - DE - STATE

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:48 PM 10/23/2013  
INITIAL FILING # 2009 2487822  
AMENDMENT # 2013 4161247  
SRV: 131228446

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
CT Lien Solutions PO Box 29071 Glendale, CA 91209-9071 Order 40371847
Delaware (S.O.S.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20092487822 08/04/2009	1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
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2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  **PARTY INFORMATION CHANGE:**  
Check one of these two boxes:  Debtor or  Secured Party of record  
**AND** Check one of these three boxes to:  
 CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c  
 ADD name: Complete item 7a or 7b, and item 7c  
 DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME	Heartland Payment Systems, Inc.			
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME
OR
7b. INDIVIDUAL'S SURNAME
INDIVIDUAL'S FIRST PERSONAL NAME
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)
SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8.  **COLLATERAL CHANGE:** Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME	JPMorgan Chase Bank, N.A., as Administrative Agent			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA: 3165.7103 Debtor: Heartland Payment Systems, Inc. 79917403

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:50 AM 02/10/2014  
INITIAL FILING # 2009 2487822  
AMENDMENT # 2014 0521054  
SRV: 140151621

1a. INITIAL FINANCING STATEMENT FILE # 2009 2487822	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
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2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.

Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
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8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT  
JPMORGAN CHASE BANK, N.A.

10. OPTIONAL FILER REFERENCE DATA  
DE-0-41968732-48213943

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <b>Jon C. Sims</b> <b>Jenner &amp; Block LLP</b> <b>353 N. Clark Street</b> <b>Chicago, Illinois 60654-3456</b>

Delaware Department of State  
U.C.C. Filing Section  
Filed: 03:45 PM 10/22/2015  
U.C.C. Initial Filing No: 2009 2487822  
Amendment No: 20154860093  
Service Request No: 20150609510

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
**2009 2487822 filed 08/04/2009**

1b.  This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3.  **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8
4.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law
5.  **PARTY INFORMATION CHANGE:**  
Check one of these two boxes:  Debtor or  Secured Party of record  
**AND** Check one of these three boxes to:  
 CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c  
 ADD name: Complete item 7a or 7b, and item 7c  
 DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8.  **COLLATERAL CHANGE:** Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a **DEBTOR**, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME <b>JPMorgan Chase Bank, N.A.</b>				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. **OPTIONAL FILER REFERENCE DATA:**  
**Filed with the Delaware Secretary of State**

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	3027359719
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CAPITOL SERVICES, INC. 615 SOUTH DUPONT HIGHWAY  DOVER DE 19901	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:30 PM 11/24/2010  
INITIAL FILING # 2010 4140426  
  
SRV: 101120938

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 NASSAU STREET	CITY PRINCETON	STATE NJ	POSTAL CODE 08542	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME JPMORGAN CHASE BANK, N.A., AS ADMINISTRATIVE AGENT				
OR				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS LOAN AND AGENCY SERVICES GROUP, 10 S. DEARBORN ST., CHICAGO	CITY	STATE IL	POSTAL CODE 60603	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

- All assets of the Debtor now owned or hereafter acquired, and all proceeds thereof.
- All of the Debtor's right, title and interest in and to the following Commercial Tort Claims, and all proceeds thereof:
  - Heartland Payment Systems, Inc. v. Global Payment Systems, MER-L-739-08, Superior Court of New Jersey;
  - Heartland Payment Systems, Inc. v. Elizabeth Player, Michael Lawson, Musical Events LLC, MER-L-185009, Superior Court of New Jersey; and
  - Heartland Payment Systems, Inc. v. Micros Systems, Inc., Merchant Link, LLC and Chase Paymentech Solutions, LLC, 3:07-CV-05629, District Court of New Jersey

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum <input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) <input type="checkbox"/> (ADDITIONAL FEE) <input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
---	---	--------------------------------------	-----------------------------------	-----------------------------------

8. OPTIONAL FILER REFERENCE DATA

002642.2423

TRADEMARK  
REEL: 005796 FRAME: 0107

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:50 PM 10/23/2013  
INITIAL FILING # 2010 4140426  
AMENDMENT # 2013 4161353  
SRV: 131228467

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
CT Lien Solutions PO Box 29071 Glendale, CA 91209-9071 Order 40371742
Delaware (S.O.S.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20104140426 11/24/2010	1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Filer, attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
---	---

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3.  **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5.  **PARTY INFORMATION CHANGE:**  
Check one of these two boxes:  Debtor or  Secured Party of record  
**AND** Check one of these three boxes to:  CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c  ADD name: Complete item 7a or 7b, and item 7c  DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME: Heartland Payment Systems, Inc.

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8.  **COLLATERAL CHANGE:** Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME: JPMorgan Chase Bank, N.A., as Administrative Agent

OR

9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. **OPTIONAL FILER REFERENCE DATA:** 3165.7103 Debtor: Heartland Payment Systems, Inc. 79917732



# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:47 PM 06/03/2015  
INITIAL FILING # 2010 4140426  
AMENDMENT # 2015 2372174  
SRV: 150876013

1a. INITIAL FINANCING STATEMENT FILE # 2010 4140426	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
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2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.  
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.  
 CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
--------------------------	----------------------------------

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT  
JPMORGAN CHASE BANK, N.A., AS ADMINISTRATIVE AGENT

10. OPTIONAL FILER REFERENCE DATA  
DE-0-48302303-50009795

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Jon C. Sims**  
**Jenner & Block LLP**  
**353 N. Clark Street**  
**Chicago, Illinois 60654-3456**

Delaware Department of State  
U.C.C. Filing Section  
Filed: 03:34 PM 10/22/2015  
U.C.C. Initial Filing No: 2010 4140426  
Amendment No: 20154859582  
Service Request No: 20150609199

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
**2010 4140426 filed 11/24/2010**

1b.  This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2.  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement
3.  **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8
4.  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law
5.  **PARTY INFORMATION CHANGE:**  
Check one of these two boxes:  Debtor or  Secured Party of record  
**AND** Check one of these three boxes to:  
 CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c  
 ADD name: Complete item 7a or 7b, and item 7c  
 DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
----------------------------------	--	--------

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8.  **COLLATERAL CHANGE:** Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral  
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a **DEBTOR**, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME  
**JPMorgan Chase Bank, N.A., as Administrative Agent**

OR

9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
--------------------------	---------------------	-------------------------------	--------

10. **OPTIONAL FILER REFERENCE DATA:**  
**Filed with the Delaware Secretary of State**

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:48 PM 02/15/2011  
INITIAL FILING # 2011 0557556  
SRV: 110158861

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 NASSAU STREET	CITY PRINCETON	STATE NJ	POSTAL CODE 08542	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME BANC OF AMERICA LEASING & CAPITAL, LLC				
OR				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 231 SOUTH LASALLE STREET	CITY CHICAGO	STATE IL	POSTAL CODE 60697	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

6CX4-4PD AE90CX-4G15-450U8FC2-HSSDC-8M1TP-480 INCLUDING BUT NOT LIMITED TO ALL REPLACEMENTS, PARTS, REPAIRS AND ATTACHMENTS INCORPORATED THEREIN OR AFFIXED THERETO, NOW OWNED OR HEREAFTER ACQUIRED AND ALL PROCEEDS THEREOF.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA				

DE-0-44459849

TRADEMARK  
REEL: 005796 FRAME: 0111

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 10:30 AM 03/10/2011  
INITIAL FILING # 2011 1111726

SRV: 110291814

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone: (800) 331-3282 Fax: (818) 662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 11459 VERIZON CREDIT	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	27514292  DEDE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Heartland Payment Systems, Inc.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 Nassau St, FL2			CITY Princeton	STATE NJ	POSTAL CODE 08542	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION DE	1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Verizon Credit Inc.						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 201 N. Franklin St. Suite 3300			CITY Tampa	STATE FL	POSTAL CODE 33602	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

Cisco Data and related equipment as described in the Verizon Premisys quote number 1-7SEOC9, Revision 1, dated 2/25/2011 as prepared for Heartland Payment Systems and located in various locations - 1 605 N. 4100 Ave. Salt Lake City UT 84116 2 776 N. Terminal Dr. Salt Lake City UT 84116 3 900 Venture Dr. Allen TX 75013 4 600 Terminal Dr. Ft. Lauderdale FL 33315 5 1250 E. Arques Ave. Sunnyvale CA 94085 6 4000 Global Gateway Connector Atlanta GA 30337 7 9400 B Airport Rd Orlando FL 32827 8 70 East India Boston MA 02110 9 1815 Cherry St. Philadelphia PA 19103 10 1327 Locust St. Philadelphia PA 19107 11 1800 Market St. Philadelphia PA 19103 12 107 S. 10th St. Philadelphia PA 19107 LESSEE is not authorized to sell, assign or otherwise transfer LESSOR'S right to the equipment described herein without the prior written consent of the LESSOR.

5. ALTERNATIVE DESIGNATION [if applicable]  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6.  This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]. 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]  All Debtors  Debtor 1  Debtor 2 [optional] (ADDITIONAL FEE)

8. OPTIONAL FILER REFERENCE DATA

27514292

106082-010

18026

TRADEMARK

REF: 005796 FRAME: 0112

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:15 PM 03/28/2011  
INITIAL FILING # 2011 1136822  
SRV: 110348709

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 90 NASSAU STREET		CITY PRINCETON	STATE NJ	POSTAL CODE 08542
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME BANC OF AMERICA LEASING & CAPITAL, LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 231 SOUTH LASALLE STREET		CITY CHICAGO	STATE IL	POSTAL CODE 60697

4. This FINANCING STATEMENT covers the following collateral:

1DD670with:1DD670-1E161DD670-12TB-B1C-E16-DC-B4PC-NA120V-6  
1C-670-AES-B1D-BST-DOCS31DDOS-DOC-A31L-BST-6701M-ENHHWDD-0  
11M-ENHSWDD-011PS-BAS-DD061DD670with:1DD670-12TB2PC-NA120V  
-61D-BST-DOCS31DDOS-DOC-A31L-BST-6701M-ENHHWDD-011M-ENHSW  
D-011PS-BAS-DD00INCLUDING BUT NOT LIMITED TO ALL REPLACEMENTS, PARTS, REPAIRS  
AND ATTACHMENTS INCORPORATED THEREIN OR AFFIXED THERETO, NOW OWNED OR HEREAFTER  
ACQUIRED AND ALL PROCEEDS THEREOF.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-44992208

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:25 PM 04/01/2011  
INITIAL FILING # 2011 1220758  
SRV: 110371770

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described on IBM Credit LLC Supplement(s) # G77446, G81086) including one or more of the following: 3249-EPU (IBM), 4319-64U (IBM), 4338-20U (IBM), 7945-E2U (IBM), 999E-002 (IBM), 999E-004 (IBM), 999E-006 (IBM), AOTU-032 (AVOCENT-32 PORT 4USER DIGITA), APPN-2B6 (APPLE-CORE I7 2.66GHZ4GB NOTEBOOK), HPKD-HCI (HEWLETT PACKARD-XEON QUAD CORE 2.66GHZ 6GB DESKTOP), SAMP-F24 (SAMSUNG-SAMSUNG 24" FLAT PANEL MONIT), 4313-CTU (IBM), 4338-10U (IBM), 9964-ABU (IBM), VIEM-F24 (VIEWSONIC-VIEWSONIC 24" LCD DISPLAY MO), XERP-857 (XEROX-COLORQUBE 8570DT - PRI) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00G77446 4197594

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-45055218

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone:(800) 331-3282 Fax: (818) 662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	11459 VERIZON CREDIT
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	28530544  DEDE

DELAWARE DEPARTMENT OF STATE  
 U.C.C. FILING SECTION  
 FILED 10:30 AM 06/01/2011  
 INITIAL FILING # 2011 2296310  
 SRV: 110696948

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Heartland Payment Systems, Inc.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 Nassau St, FL2			CITY Princeton	STATE NJ	POSTAL CODE 08542	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION DE		1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION		2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Verizon Credit Inc.						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 201 N. Franklin St. Suite 3300			CITY Tampa	STATE FL	POSTAL CODE 33602	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

Cisco Data and related equipment as described in the Verizon Premisys quote number 1-9KINZN, Revision 1, dated 5/5/2011 as prepared for Heartland Payment Systems and located in various locations - 44820 Saarinen Dr. Sterling VA 20166 1 Airport Dr. Oakland CA 94621 7207 Chapman Hwy Knoxville TN 37920 924 E. Avenue J Grand Prairie TX 75050 601 W 1st Ave. Spokane WA 99201 1115 Washington St. SE Olympia WA 98501 3131 Holcombe Houston TX 77021 3111 S. Western Ave. Chicago IL 60608 2901 3rd Ave. Seattle WA 98121 904 11th St Sacramento CA 95814 1701 Airport Blvd San Jose CA 95110 6000 S. Terminal Pkwy Atlanta GA 30320 7101 Stone Mill Dr. Columbus GA 31909 375 Riverside Pkwy Lithia Springs GA 30122 10500 Lackman Rd. Lenexa KS 66219 800 Airline Hwy Kenner LA 70062 201 N. 16th St. Omaha NE 68197 1 Aerojet Way #200 North Las Vegas NV 89030 5555 Scarborough Rd Columbus OH 43232 17802 International Blvd SeaTac WA 98158 LESSEE is not authorized to sell, assign or otherwise transfer LESSOR'S right to the equipment described herein without the prior written consent of the LESSOR.

5. ALTERNATIVE DESIGNATION [if applicable] <input checked="" type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]			7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2		
8. OPTIONAL FILER REFERENCE DATA					

28530544

106082-010

18026

TRADEMARK

REEL 005796 FRAME 0115

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:14 PM 07/28/2011  
INITIAL FILING # 2011 2929563  
SRV: 110869855

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described on IBM Credit LLC Supplement(s) # G89035, G89123) including one or more of the following: 7143-B6U (IBM), 999E-006 (IBM), 7143-B1U (IBM), 999E-004 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00G89035 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
--	---	--------------------------------------	-----------------------------------	-----------------------------------

8. OPTIONAL FILER REFERENCE DATA  
DE-0-29218130-45788091



**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone:(800) 331-3282 Fax: (818) 662-4141	
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	11459 VERIZON CREDIT
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	29066353  DEDE

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 10:00 AM 07/19/2011  
INITIAL FILING # 2011 3120832  
  
SRV: 110842546

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Heartland Payment Systems, Inc.					
OR	1b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 90 Nassau St, FL2		CITY Princeton	STATE NJ	POSTAL CODE 08542	COUNTRY USA
1d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION CORPORATION	1f. JURISDICTION OF ORGANIZATION DE	1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> NONE	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Verizon Credit Inc.					
OR	3b. INDIVIDUAL'S LAST NAME				
	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 201 N. Franklin St. Suite 3300		CITY Tampa	STATE FL	POSTAL CODE 33602	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

Cisco Data and related equipment asa described in the Verizon Premisys quote number 1-AY2KLT, Revision 1, dated 7/1/2011 as prepared for Heartland Payment Systems and located at the following sites - 1 TSYS Way, Bldg A1, Columbus, GA 31901; 600 N. Dairy Ashford St. Houston, TX 77070; 511 S. Keeler Ave, Bartlesville, OK 74003 LESSEE is not authorized to sell, assign or otherwise transfer LESSOR'S right to the equipment described herein without the prior written consent of the LESSOR.

5. ALTERNATIVE DESIGNATION (if applicable)	<input checked="" type="checkbox"/> LESSEE/LESSOR	<input type="checkbox"/> CONSIGNEE/CONSIGNOR	<input type="checkbox"/> BAILEE/BAILOR	<input type="checkbox"/> SELLER/BUYER	<input type="checkbox"/> AG. LIEN	<input type="checkbox"/> NON-UCC FILING
6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (OPTIONAL FEE)		<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2	
8. OPTIONAL FILER REFERENCE DATA						

29066353 106082-012 18266

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES 2727 ALLEN PARKWAY SUITE 1000 HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
 U.C.C. FILING SECTION  
 FILED 07:39 PM 09/19/2011  
 INITIAL FILING # 2011 3594499  
 SRV: 111020538

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 90 NASSAU STREET		CITY PRINCETON	STATE NJ	POSTAL CODE 08542
				COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME BANC OF AMERICA LEASING & CAPITAL, LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 135 S. LASALLE STREET, 10TH FLOO R		CITY CHICAGO	STATE IL	POSTAL CODE 60603
				COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

(6) CX4-4PDAE, (60) CX-4G10-600U, (30) CX-SA07-020U, (4) SFP-HSSDC2-5M, (1) UTIL-WIN,  
 (1) PSUPGD-CLAR

INCLUDING BUT NOT LIMITED TO ALL REPLACEMENTS, PARTS, REPAIRS AND ATTACHMENTS  
 INCORPORATED THEREIN OR AFFIXED THERETO, NOW OWNED OR HEREAFTER ACQUIRED AND  
 ALL PROCEEDS THEREOF.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-29876021-45890389

TRADEMARK  
 REEL: 005796 FRAME: 0118

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:27 PM 11/22/2011  
INITIAL FILING # 2011 4488527  
SRV: 111223223

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described on IBM Credit LLC Supplement(s) # H03007) including one or more of the following: 999E-002 (IBM), 999E-006 (IBM), CISU-3PS (CISCO SYSTEMS INC.-CISCO 3750G-24PS), CISU-451 (CISCO SYSTEMS INC.-CISCO CATALYST 4510R SWITCH), CISU-558 (CISCO-5508 WIRELESS CONTROLL), CISU-925 (CISCO-3925 INTEGRATED SERVI), CISU-A51 (CISCO-AIRONET 2451 ACCESS PO), CISU-A62 (CISCO-AIRONET 1262 ACCESS PO), CISU-R21 (CISCO SYSTEMS INC.-CISCO 2811 INTEGRATED SERVICES ROUTER) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (11/22/11) UCC Log Number: CPD00H03007 4201427

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum <input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-30731795-46036739

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 03:53 PM 01/18/2012  
INITIAL FILING # 2012 0218166  
SRV: 120059395

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described on IBM Credit LLC Supplement(s) # H08187, H08202) including one or more of the following: 2810-114 (IBM), 9SSR-001 (IBM), 7871-C6U (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H08187 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-31434884-46154640

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 06:26 PM 04/26/2012  
INITIAL FILING # 2012 1630401  
SRV: 120480594

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES 2727 ALLEN PARKWAY SUITE 1000 HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H13589) including one or more of the following: 999E-002 (IBM), 999E-006 (IBM), CISU-451 (CISCO SYSTEMS INC.-CISCO CATALYST 4510R SWITCH), CISU-A51 (CISCO-AIRONET 2451 ACCESS PO), CISU-A62 (CISCO-AIRONET 1262 ACCESS PO) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (04/25/12) UCC Log Number: CPD00H13589 4201427

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum  (if applicable)

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)  [ADDITIONAL FEE]  [optional]

All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA

DE-0-32979601-46374093

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:43 PM 05/18/2012  
INITIAL FILING # 2012 1923160  
SRV: 120589947

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H14069, H15643) including one or more of the following: 999E-006 (IBM), CISU-2AG (CISCO SYSTEMS INC.-CISCO AIRONET 1242AG), CISU-3PA (CISCO SYSTEMS INC.-CISCO 3750G-48PS), 7945-E7U (IBM), 999E-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H14069 4201427

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-33299854-46425661

TRADEMARK  
REEL: 005796 FRAME: 0122

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
**Haley Serbin (704) 503-2596**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**King & Spalding**  
**100 North Tryon Street**  
**Suite 3900**  
**Charlotte, NC 28202**

**hserbin@kslaw.com**

**DELAWARE DEPARTMENT OF STATE**  
**U.C.C. FILING SECTION**  
**FILED 10:46 AM 07/20/2012**  
**INITIAL FILING # 2012 2792895**

**SRV: 120855473**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

1a. ORGANIZATION'S NAME  
**Heartland Payment Systems, Inc.**

OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**90 Nassau Street, Floor 2 Princeton NJ 08542 US**

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any  
**Corporation Delaware 3248384**  NONE

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any  
 NONE

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR(S/P) - insert only one secured party name (3a or 3b)**

3a. ORGANIZATION'S NAME  
**Wells Fargo Bank, National Association, as Lender**

OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY  
**1525 West W.T. Harris Blvd., Mail Code: NC 0680 Charlotte NC 28262 US**

4. This FINANCING STATEMENT covers the following collateral:  
**See Exhibit A attached hereto for a description of the Collateral.**

5. ALTERNATIVE DESIGNATION (if applicable):  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (OPTIONAL FEE)  All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA  
**Filed with: DE - Secretary of State**

F# 344588  
A# 502010

**EXHIBIT A**

**Debtor: Heartland Payment Systems, Inc.**

**Secured Party: Wells Fargo Bank, National Association, as Lender**

Any and all right, title and interest of Debtor in and to the Merchant Accounts Receivable, whether now owned, existing or acquired, or arising hereafter.

As used herein,

**“Merchant”** shall mean a merchant who receives transaction card services from Debtor pursuant to a Merchant Agreement.

**“Merchant Agreement”** shall mean the contract between Debtor and Merchant for the provision of the transaction card services pursuant to that certain Merchant Financial Services Agreement dated as of February 8, 2012 by and between Debtor and Secured Party, in its capacity as sponsor bank, as amended, restated, supplemented or otherwise modified from time to time.

**“Merchant Accounts Receivable”** shall mean all accounts (as such term is defined in the UCC), payment intangibles (as such term is defined in the UCC) and other amounts owed to Debtor by the Merchants arising from or created pursuant to the Merchant Agreements.



# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:38 PM 07/25/2012  
INITIAL FILING # 2012 2869735  
SRV: 120872727

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400	CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE	CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H18439, H19153, H20131, H20769) including one or more of the following: 999E-002 (IBM), 999E-006 (IBM), CISU-901 (CISCO-2901 INTEGRATED SERVICES ROU), CISU-N51 (CISCO-NEXUS 5010 SWITCH), CISU-C29 (CISCO-2911 INTEGRATED SERVICE), CISU-P45 (CISCO SYSTEMS INC.-CATALYST 4500 2800ACV POWER SUPPLY) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H18439 4197594

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-34149770-46583302					

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 07:57 PM 08/31/2012  
INITIAL FILING # 2012 3402197  
SRV: 120994073

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H23213) including one or more of the following: CISU-232 (CISCO-CISU 232 CISCO NEXUS 2232PP 10GE FABR) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (08/31/12)  
UCC Log Number: CPD00H23213 4201427

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-34618736-46776034				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:12 PM 09/11/2012  
INITIAL FILING # 2012 3507508  
SRV: 121020563

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H24691) including one or more of the following: 2810-114 (IBM), 9SSR-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (09/11/12) UCC Log Number: CPD00H24691 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-34725871-46796171

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:20 PM 11/06/2012  
INITIAL FILING # 2012 4277481  
SRV: 121199684

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H27482) including one or more of the following: 9117-MMB (IBM), 9HB1-PSB (IBM), 9SSR-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (10/22/12) UCC Log Number: CPD00H27482 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-35523024-46926061

TRADEMARK  
REEL: 005796 FRAME: 0128

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:12 PM 11/26/2012  
INITIAL FILING # 2012 4543288  
SRV: 121261689

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 90 NASSAU STREET		CITY PRINCETON	STATE NJ	POSTAL CODE 08542	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME BANC OF AMERICA LEASING & CAPITAL, LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 135 SOUTH LASALLE STREET 10TH FLOOR		CITY CHICAGO	STATE IL	POSTAL CODE 60603	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

- (2) MDS-PBFADV48U
- (96) MDS-8G-SW
- (2) PS-BAS-INDIR

INCLUDING BUT NOT LIMITED TO ALL REPLACEMENTS, PARTS, REPAIRS AND ATTACHMENTS INCORPORATED THEREIN OR AFFIXED THERETO, NOW OWNED OR HEREAFTER ACQUIRED AND ALL PROCEEDS THEREOF.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-35766361-46965382

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:40 PM 12/18/2012  
INITIAL FILING # 2012 4940088  
SRV: 121359714

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H31587) including one or more of the following: 7915-M2U (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (12/18/12) UCC Log Number: CPD00H31587 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-36196031-47027845

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:59 PM 01/18/2013  
INITIAL FILING # 2013 0248444  
SRV: 130067196

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H35226, H35231) including one or more of the following: 3563-DD2 (IBM), 3563-FD2 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H35226 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-36667320-47107004

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 03:15 PM 01/30/2013  
INITIAL FILING # 2013 0397621  
SRV: 130109397

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H35779) including one or more of the following: 7143-B6U (IBM), 999E-006 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (01/30/13) UCC Log Number: CPD00H35779 4215768

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-36810700-47134126



# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:11 AM 03/21/2013  
INITIAL FILING # 2013 1080317  
SRV: 130341244

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H37264) including one or more of the following: 8722-C2U (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (03/20/13) UCC Log Number: CPD00H37264 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-37399199-47260932

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:12 PM 04/17/2013  
INITIAL FILING # 2013 1479469  
SRV: 130449418

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME					
HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
6860 DALLAS PKWY 400		PLANO	TX	75024	US
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION			
CORPORATION		DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME					
IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
1 NORTH CASTLE DRIVE		ARMONK	NY	10504	US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H38718) including one or more of the following: 7915-L2U (IBM), 999E-004 (IBM), 999E-006 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (04/17/13) UCC Log Number: CPD00H38718 4215768

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-37755012-47339334

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 06:45 PM 05/13/2013  
INITIAL FILING # 2013 1828368  
SRV: 130572197

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H42700) including one or more of the following: 7914-32U (IBM), 7914-EAU (IBM), 999E-004 (IBM), 999E-006 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (05/13/13)  
UCC Log Number: CPD00H42700 4218287

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-38118586-47416718				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:57 PM 06/14/2013  
INITIAL FILING # 2013 2290337  
SRV: 130777270

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H38322, H42290, H42629) including one or more of the following: 999E-002 (IBM), 999E-006 (IBM), CISU-451 (CISCO SYSTEMS INC.-CISCO CATALYST 4510R SWITCH), CISU-78P (CISCO SYSTEMS INC.-CISCO CATALYST 3750 48 PS SWITCH), CISU-925 (CISCO-3925 INTERGRATED SERVI), CISU-A51 (CISCO-AIRONET 2451 ACCESS PO), CISU-A62 (CISCO-AIRONET 1262 ACCESS PO), CISU-548 (CISCO-3750X-48PTD SWITCH), 999E-003 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H38322 4218287

5. ALTERNATIVE DESIGNATION - Lessee-Lessor				
6.	<input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-38560506-47517588				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:41 PM 07/17/2013  
INITIAL FILING # 2013 2748789  
SRV: 130887280

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H45021) including one or more of the following: 1746-A4D (IBM), 7914-EAU (IBM), 999E-004 (IBM), 999E-006 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (07/16/13)  
UCC Log Number: CPD00H45021 4215768

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-39013960-47611658				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 10:55 AM 08/01/2013  
INITIAL FILING # 2013 2991074  
SRV: 130943014

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H45622, H45655) including one or more of the following: 7915-L2U (IBM), 9994-001 (IBM), GUDX-900 (GUARDIAN-9000 HARDWARE SECUR) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H45622 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-39217489-47655949

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 08:03 PM 08/01/2013  
INITIAL FILING # 2013 3007656  
SRV: 130946804

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H47301) including one or more of the following: 7914-M2U (IBM), 9994-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (08/01/13) UCC Log Number: CPD00H47301 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-39227812-47658085

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:44 PM 10/23/2013  
INITIAL FILING # 2013 4162765

SRV: 131228927

A. NAME & PHONE OF CONTACT AT FILER (optional)
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address)
CT Lien Solutions PO Box 29071 Glendale, CA 91209-9071 Order 40372993
Filed In: Delaware (S.O.S.)

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a ORGANIZATION'S NAME Heartland Payment Systems, Inc.				
OR				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 90 Nassau Street, Second Floor	CITY Princeton	STATE NJ	POSTAL CODE 08542	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME Bank of America, N.A., as Administrative Agent				
OR				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 135 S. LaSalle St., Mail Code: IL4-135-09-61	CITY Chicago	STATE IL	POSTAL CODE 60603	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:  
All assets of the Debtor now owned or at any time hereafter acquired or in which the Debtor now has or at any time in the future may acquire any interest and all proceeds thereof.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser	
8. OPTIONAL FILER REFERENCE DATA: SOS-DE	

79893365





# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

Delaware Department of State  
U.C.C. Filing Section  
Filed: 12:20 PM 12/31/2015  
U.C.C. Initial Filing No: 2013 4162765  
Amendment No: 20156363062  
Service Request No: 20151606815

<b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b> CSC 800-858-5294
<b>B. E-MAIL CONTACT AT FILER (optional)</b> FILINGDEPT@CSCINFO.COM
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b>  801 ADLAI STEVENSON DR [109634678] SPRINGFIELD, IL 62703  US

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

<b>1a. INITIAL FINANCING STATEMENT FILE NUMBER</b> 20134162765	<b>1b.</b> <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13
---	---

**2.**  **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

**3.**  **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

**4.**  **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

**5.**  **PARTY INFORMATION CHANGE:**  
Check one of these two boxes:  
This Change affects  Debtor or  Secured Party of record

**AND** Check one of these three boxes to:  
 CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c  
 ADD name: Complete item 7a or 7b, and item 7c  
 DELETE name: Give record name to be deleted in item 6a or 6b

**6. CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

**7. CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME				
OR	7b. INDIVIDUAL'S SURNAME		INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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**8.**  **COLLATERAL CHANGE:** Also check one of these four boxes:  ADD collateral  DELETE collateral  RESTATE covered collateral  ASSIGN collateral

Indicate collateral:  
**Solely those "Purchased Assets" sold to Echosat, Inc. pursuant to that certain Asset Purchase Agreement, among Echosat, Inc., Heartland Payment Systems, Inc. and Heartland Acquisition LLC, dated December 31, 2015, as such term is defined in such Asset Purchase Agreement. This partial release shall not affect or release any other assets or Collateral granted to the Secured Party by the Debtor.**

**9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here  and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME BANK OF AMERICA, N.A., AS ADMINISTRATIVE AGENT				
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

**10. OPTIONAL FILER REFERENCE DATA:**  
3165.7103 DEBTOR:HEARTLAND PAYMENT SYSTEMS, INC.

**UCC FINANCING STATEMENT AMENDMENT ADDITIONAL PARTY**

FOLLOW INSTRUCTIONS

**19. INITIAL FINANCING STATEMENT FILE NUMBER:** Same as item 1a on Amendment form  
**20134162765**

**20. NAME OF PARTY AUTHORIZING THIS AMENDMENT:** Same as item 9 on Amendment form

20a. ORGANIZATION'S NAME <b>BANK OF AMERICA, N.A., AS ADMINISTRATIVE AGENT</b>	
OR	
20b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**21. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (21a or 21b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

21a. ORGANIZATION'S NAME				
OR				
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
21c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**22. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (22a or 22b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

22a. ORGANIZATION'S NAME				
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
22c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**23. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (23a or 23b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

23a. ORGANIZATION'S NAME				
OR				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
23c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**24.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (24a or 24b)

24a. ORGANIZATION'S NAME				
OR				
24b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
24c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**25.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (25a or 25b)

25a. ORGANIZATION'S NAME				
OR				
25b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
25c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**26. MISCELLANEOUS:**

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:09 PM 11/13/2013  
INITIAL FILING # 2013 4478070  
SRV: 131305819

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 6860 DALLAS PKWY 400			CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION			1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION			2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE			CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H48602, H51604) including one or more of the following: 999E-002 (IBM), 999E-006 (IBM), CISU-16I (CISCO-AIRONET 1602I CONTROLL), CISU-457 (CISCO SYSTEMS INC.-CISCO CATALYST 4507 SWITCH.), CISU-925 (CISCO-3925 INTERGRATED SERVI), CISU-48P (CISCO-3750X-48PL SWITCH) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H48602 4218287

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-40631922-47947821					

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:12 PM 11/22/2013  
INITIAL FILING # 2013 4627940  
SRV: 131342834

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H54870) including one or more of the following: 8722-C2U (IBM), 9994-001 (IBM), 9SSR-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (11/22/13) UCC Log Number: CPD00H54870 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-40768822-47977465

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 02:14 PM 12/24/2013  
INITIAL FILING # 2013 5109161  
SRV: 131473850

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H57083) including one or more of the following: 8722-C2U (IBM), 9994-001 (IBM), 9SSR-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (12/24/13) UCC Log Number: CPD00H57083 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-41148509-48066228				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:13 PM 01/13/2014  
INITIAL FILING # 2014 0159004  
SRV: 140041991

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H51628) including one or more of the following: 999E-002 (IBM), CISU-901 (CISCO-2901 INTEGRATED SERVICES ROU), CISU-C29 (CISCO-2911 INTEGRATED SERVICE), CISU-R44 (CISCO-4451 INTEGRATED SERVIC), CISU-R92 (CISCO-1921 SERVICE ROUTER) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (01/13/14) UCC Log Number: CPD00H51628 4218287

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-41362943-48127242					

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 03:56 PM 01/31/2014  
INITIAL FILING # 2014 0416560  
SRV: 140119573

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H60600) including one or more of the following: 8205-E6D (IBM), 9992-003 (IBM), 9SSR-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (01/31/14) UCC Log Number: CPD00H60600 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-41878344-48188581

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:24 PM 03/03/2014  
INITIAL FILING # 2014 0807008  
SRV: 140278216

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Corporation Service Company	8008585294
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CORPORATION SERVICE COMPANY	
2711 CENTERVILLE ROAD	
SUITE 400	
WILMINGTON DE 19808	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 NASSAU STREET	CITY PRINCETON	STATE NJ	POSTAL CODE 08542	COUNTRY US
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME FORSYTHE/MCARTHUR ASSOCIATES, INC.				
OR				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 7770 FRONTAGE RD.	CITY SKOKIE	STATE IL	POSTAL CODE 60077	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

Computer, data processing, telecommunications and other equipment together with all attachments, accessories, replacements, products and proceeds thereof, from time to time leased by Lessor to Lessee pursuant to Master Equipment Lease Agreement No. F94610 dated January 01, 2008 and various schedules entered into pursuant thereto. This financing statement is filed for informational purposes only and shall not of itself be a factor in determining whether or not a lease is intended as security.

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA [84775991]				



# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Corporation Service Company	8008585294
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CORPORATION SERVICE COMPANY	
2711 CENTERVILLE ROAD	
SUITE 400	
WILMINGTON DE 19808	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 06:28 PM 03/05/2014  
INITIAL FILING # 2014 0807008  
AMENDMENT # 2014 0859264  
SRV: 140293295

1a. INITIAL FINANCING STATEMENT FILE # 2014 0807008	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input type="checkbox"/>
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2.  TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3.  CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects  Debtor or  Secured Party of record. Check only one of these two boxes.  
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.  
 CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.  DELETE name: Give record name to be deleted in item 6a or 6b.  ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:

6a. ORGANIZATION'S NAME				
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:

7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION
--------------------------	----------------------------------

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral  deleted or  added, or give entire  restated collateral description, or describe collateral  assigned.

Computer, data processing, telecommunications and other equipment together with all attachments, accessories, replacements, products and proceeds thereof, from time to time leased by Lessor to Lessee pursuant to Master Equipment Lease Agreement No. F94610 dated January 08, 2008 and various schedules entered into pursuant thereto. This financing statement is filed for informational purposes only and shall not of itself be a factor in determining whether or not a lease is intended as security.

9. NAME of SECURED PARTY of RECORD AUTHORIZING THIS AMENDMENT  
Forsythe/McArthur Associates, Inc.

10. OPTIONAL FILER REFERENCE DATA  
Debtor: HEARTLAND PAYMENT SYSTEMS, INC. #84862343

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:49 PM 03/28/2014  
INITIAL FILING # 2014 1227131  
SRV: 140400887

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H63785) including one or more of the following: 999E-002 (IBM), 999E-006 (IBM), CISU-N64 all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (03/28/14) UCC Log Number: CPD00H63785 4218287

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-42643278-48379785				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 07:02 PM 04/01/2014  
INITIAL FILING # 2014 1284322

SRV: 140415810

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

## 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME				
HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS				
6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024
COUNTRY US				
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION		
CORPORATION		DE		

## 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS				
CITY		STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

## 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME				
IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS				
1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504
COUNTRY US				

## 4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H61380, H61879, H62326, H62327, H64637, H64684) including one or more of the following: 2072-L2C (IBM), 7914-C3U (IBM), 7915-G3U (IBM), 999E-003 (IBM), 999E-004 (IBM), 999E-006 (IBM), 9994-008 (IBM), HPKS-1A8 (HEWLETT PACKARD-2X AMD OPTERON 8CORE 3.2GHZ), 8722-C2U (IBM), 9994-001 (IBM), 9994-004 (IBM), 9SSR-001 (IBM), 2499-816 (IBM), 9HB1-STO (IBM), 2812-214 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H61380 4218287

## 5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (or recorded) in the REAL ESTATE RECORDS. Attach Addendum <input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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## 8. OPTIONAL FILER REFERENCE DATA

DE-0-42686554-48392133

TRADEMARK  
REEL: 005796 FRAME: 0151

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:04 AM 04/16/2014  
INITIAL FILING # 2014 1494137  
SRV: 140477047

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME					
HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
6860 DALLAS PKWY 400		PLANO	TX	75024	US
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION			
CORPORATION		DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME					
IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
1 NORTH CASTLE DRIVE		ARMONK	NY	10504	US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H62317) including one or more of the following: 8722-C2U (IBM), 9994-001 (IBM), 9994-004 (IBM), 9SSR-001 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (04/16/14)  
UCC Log Number: CPD00H62317 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-42883531-48450297

TRADEMARK  
REEL: 005796 FRAME: 0152

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 03:54 PM 06/23/2014  
INITIAL FILING # 2014 2464519  
SRV: 140872091

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 6860 DALLAS PARKWAY #400		CITY PLANO	STATE TX	POSTAL CODE 75024
		1e. TYPE OF ORGANIZATION OTHER	1f. JURISDICTION OF ORGANIZATION DE	

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME CIT FINANCE LLC				
OR				
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 10201 CENTURION PARKWAY NORTH, SUITE 100		CITY JACKSONVILLE	STATE FL	POSTAL CODE 32256

4. This FINANCING STATEMENT covers the following collateral:

This is a True Lease this UCC-1 Financing Statement is being filed for information purposes only.

Seq	Description	Serial Number	Model
00001)	SHARP COPIER	45111431	MX-4141N
00002)	SHARP COPIER	45111441	MX-4141N
00003)	SHARP COPIER	45111361	MX-4141N
00004)	SHARP COPIER	45111271	MX-4141N

plus all other types of office equipment and products, computers, security systems and other items of equipment now and hereafter leased to and/or financed for Debtor/Lessee by Secured Party/Lessor, and including all replacements, upgrades and substitutions hereafter occurring to all of the foregoing equipment and all now existing and future attachments, parts, accessories and add-ons for all of the foregoing items and types of equipment, and all products thereof.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum <input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-43825578-48717344

TRADEMARK  
REEL: 005796 FRAME: 0153

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 12:01 PM 07/07/2014  
INITIAL FILING # 2014 2660157  
SRV: 140922188

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 6860 DALLAS PKWY 400	CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE	CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H68317) including one or more of the following: 9843-AE1 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (06/20/14) UCC Log Number: CPD00H68317 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-43994073-48768307

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Corporation Service Company	8008585294
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CORPORATION SERVICE COMPANY	
2711 CENTERVILLE ROAD	
SUITE 400	
WILMINGTON DE 19808	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:15 AM 08/26/2014  
INITIAL FILING # 2014 3416211  
SRV: 141109108

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 90 NASSAU ST		CITY PRINCETON	STATE NJ	POSTAL CODE 08542	COUNTRY US
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME APPLE FINANCIAL SERVICES					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS PO BOX 35701		CITY BILLINGS	STATE MT	POSTAL CODE 59107-570	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All Equipment, described herein or otherwise, leased to or financed for the Debtor by Secured Party under that certain Master Lease Agreement No. 9767997-001 Including all accessories, accessions, replacements, additions, substitutions, add-ons and upgrades thereto, and any proceeds therefrom.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE]	<input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

EFS - Indirect - Technology and Services - 9767997

TRADEMARK  
REEL: 005796 FRAME: 0155

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 04:16 PM 01/28/2015  
INITIAL FILING # 2015 0386804

SRV: 150111138

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME					
HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
6860 DALLAS PKWY 400		PLANO	TX	75024	US
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION			
CORPORATION		DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME					
IBM CREDIT LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
1 NORTH CASTLE DRIVE		ARMONK	NY	10504	US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H80818) including one or more of the following: 9848-AE1 (IBM), 9848-AC1 (IBM), 9HB1-STO (IBM), 9994-MI9 (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H80818 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-46577489-49487739

TRADEMARK  
REEL: 005796 FRAME: 0156



# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 09:46 AM 02/02/2015  
INITIAL FILING # 2015 0439223  
SRV: 150127336

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H82029) including one or more of the following: 2812-214 (IBM), 9HB1-STO (IBM) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (01/30/15) UCC Log Number: CPD00H82029 4217627

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-46632939-49499784				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 09:46 AM 02/02/2015  
INITIAL FILING # 2015 0439272  
SRV: 150127341

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 6860 DALLAS PKWY 400		CITY PLANO	STATE TX	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H81093) including one or more of the following: 9994-MI9 (IBM), THLQ-500 (THALES-NSHIELD CONNECT 500) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (01/28/15)  
UCC Log Number: CPD00H81093 4201427

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [if applicable]	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] [optional]	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA DE-0-46632958-49499791				

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:42 PM 02/05/2015  
INITIAL FILING # 2015 0524776  
SRV: 150155142

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 90 NASSAU STREET		CITY NEW JERSEY	STATE NJ	POSTAL CODE 08542	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME BANC OF AMERICA LEASING & CAPITAL, LLC					
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 135 S. LASALLE STREET IL4-135-10-61		CITY CHICAGO	STATE IL	POSTAL CODE 60603	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:  
Collateral Description - please see attachment

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA				

DE-0-46694951-49517485

TRADEMARK  
REEL: 005796 FRAME: 0159

COMPUTER, DATA PROCESSING AND RELATED EQUIPMENT FURTHER DESCRIBED IN AND SUBJECT TO SCHEDULE F94610 Z TO LEASE NO. F94610 A COPY OF WHICH (OR SCHEDULE 1 SHOWING THE SAME EQUIPMENT) IS ATTACHED HERETO AND MADE A PART HEREOF AND ALL PROCEEDS OF SAID EQUIPMENT. THIS FINANCING STATEMENT IS FILED FOR INFORMATIONAL PURPOSES ONLY AND SHALL NOT OF ITSELF BE A FACTOR IN DETERMINING WHETHER OR NOT SAID LEASE IS INTENDED AS SECURITY.

## Schedule 1

## 1. Equipment:

<u>Qty</u>	<u>Type</u>	<u>Model</u>	<u>Serial No.</u>	<u>Description</u>
<b>LEASE: 94610 Z</b>				
<b>MANUFACTURER: IBM</b>				
Location: 900 VENTURE DR, ALLEN, TX 75013-1197				
1	2812-2	14-001		AAS SW ORDER INDICATOR
1	2812-2	14-003		BASE UNIT INDICATOR
1	2812-2	14-003		RETAIL UNIT INDICATOR
1	2812-2	14-010		UNIX (AIX HP UX SOLARIS)
1	2812-2	14-010		LINUX HOST ATTACHMENT
1	2812-2	14-010		WINDOWS HOST ATTACHMENT
1	2812-2	14-010		VMWARE HOST ATTACHMENT
1	2812-2	14-081		15 MODULE INITIAL CAPACITY
6	2812-2	14-204		4TB INTERFACE MODULE 1GBE
9	2812-2	14-204		4TB DATA MODULE
15	2812-2	14-226		800GB FLASH CACHE OPTION
1	2812-2	14-910		MODEM
1	2812-2	14-981		US/CA/LA/AP 60A PIN CORD
1	2812-2	14-989		SINGLE PHASE POWER
1	2812-2	14-000		XIV STORAGE SYSTEM MODEL R3
1	5639-Y	YC-000	7811659	CLOUDSTORAGE SERV PROVIDERS
1	5639-Y	YC-001		I XIV BAS 1YRSWMANT PS D QTY
15	5639-Y	YC-002		I XIV BAS 1YRSWMANT PS D QTY
1	5639-Y	YC-500		RISC/6000 PRELOAD
15	5639-Y	YC-001		I XIV BAS 1YRSWMANT PS D QTY
1	5639-X	54-900		SWMA AUTO RENEWAL REGISTRATION
1	5639-X	54-000		CLOUDSTOR SERV PROV
15	5639-X	54-001		XIV F MAINTBA 3YRREG PS D QTY
15	5639-X	54-001		XIV S MAINTBA 3YRREG PS D QTY

2. The Equipment described is leased by HEARTLAND PAYMENT SYSTEMS, INC. as Lessee, under Schedule Z, (the "Lease") to Master Lease Agreement No. F94610 dated January 8, 2008.

LESSEE: HEARTLAND PAYMENT SYSTEMS, INC.  
ADDRESS: 90 NASSAU STREET, NEW JERSEY, NJ 08542

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 07:08 PM 02/27/2015  
INITIAL FILING # 2015 0843556  
SRV: 150291040

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR	1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS 90 NASSAU STREET	CITY PRINCETON	STATE NJ	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE	CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H80117) including one or more of the following: 9994-002 (IBM) 9994-MI9 (IBM) CISU-24X (CISCO-CATALYST 2960X 24 PORT), CISU-548 (CISCO-3750X-48PTD SWITCH), CISU-654 (CISCO SYSTEMS INC.-CISCO CATALYST 6504E SWITCH), CISU-C29 (CISCO-2911 INTEGRATED SERVICE), CISU-C92 (CISCO-2921 ROUTER), CISU-R44 (CISCO-WAVE APPLIANCE), CISU-X12 (CISCO-3750X-12S-E-SWITCH), CISU-X16 (CISCO-CATALYST 4500-X 16 PORT) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. UCC Log Number: CPD00H80117 4215725

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-46968985-49592961

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 05:17 PM 03/04/2015  
INITIAL FILING # 2015 0915834  
SRV: 150315172

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.					
OR					
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
1c. MAILING ADDRESS 90 NASSAU STREET		CITY PRINCETON	STATE NJ	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION		1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME					
OR					
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC					
OR					
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
3c. MAILING ADDRESS 1 NORTH CASTLE DRIVE		CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described in IBM Credit LLC agreement number(s) H81737) including one or more of the following: 1754-D1X (IBM), 2072-24C (IBM), 2498-X24 (IBM), 7915-EKU (IBM), 9994-002 (IBM), 9994-MI9 (IBM), 9SSR-001 (IBM), HPKQ-310 (HEWLETT PACKARD-CORE I7 2.1 GHZ 3GEN 8GB), ZSUM-F24 (ASUS-24" LCD MONITOR) all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing. See UCC 9-505. (03/02/15) UCC Log Number: CPD00H81737 4196865

5. ALTERNATIVE DESIGNATION - Lessee-Lessor

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA  
DE-0-47041231-49608528

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Corporation Service Company	8008585294
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CORPORATION SERVICE COMPANY	
2711 CENTERVILLE ROAD	
SUITE 400	
WILMINGTON DE 19808	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:11 AM 06/23/2015  
INITIAL FILING # 2015 2679628  
SRV: 150957844

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 NASSAU ST	CITY PRINCETON	STATE NJ	POSTAL CODE 08542-452	COUNTRY US
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME APPLE FINANCIAL SERVICES				
OR				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS PO BOX 35701	CITY BILLINGS	STATE MT	POSTAL CODE 59107-570	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All Equipment, described herein or otherwise, leased to or financed for the Debtor by Secured Party under that certain Master Lease Agreement No. 9767997006 including all accessories, accessions, replacements, additions, substitutions, add-ons and upgrades thereto, and any proceeds therefrom.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum <input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

EFS - Indirect - Technology and Services - 9767997

TRADEMARK  
REEL: 005796 FRAME: 0164



# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Gisella Melendez	8008335778
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
UCC DIRECT SERVICES	
2727 ALLEN PARKWAY	
SUITE 1000	
HOUSTON TX 77019	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 08:37 AM 07/28/2015  
INITIAL FILING # 2015 3247987  
SRV: 151099409

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.						
OR	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 NASSAU STREET, ""			CITY PRINCETON	STATE NJ	POSTAL CODE 75024	COUNTRY US
1e. TYPE OF ORGANIZATION CORPORATION			1f. JURISDICTION OF ORGANIZATION DE			

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME						
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION			2f. JURISDICTION OF ORGANIZATION			

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS ONE NORTH CASTLE DRIVE, ""			CITY ARMONK	STATE NY	POSTAL CODE 10504	COUNTRY US

4. This FINANCING STATEMENT covers the following collateral:

All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described on IBM Credit LLC Agreement(s) 001583 including one or more of the following: 9HB1/STO -SOFTWARE FINANCED FROM STORAGE BRAND,2078/24C -V5000 SFF Control,9OT9/IBM -IBM OTHER,2078/24E -V5000 SFF Expansion,2078/24C -V5000 SFF Control,9OT9/IBM -IBM OTHER,2498/X24 -System Networking SAN24B 5,2078/24E -V5000 SFF Expansion,XOT9/OEM -OEM OTHER,9MT3/IBM -IBM PREPAID MAINTENANCE,2498/X24 -System Networking SAN24B 5,2078/24E -V5000 SFF Expansion,9MT3/IBM -IBM PREPAID MAINTENANCE,9OT9/IBM -IBM OTHER,XOT9/OEM -OEM OTHER,2498/X24 -System Networking SAN24B 5,9MT3/IBM -IBM PREPAID MAINTENANCE,9HB1/STO -SOFTWARE FINANCED FROM STORAGE BRAND,XOT9/OEM -OEM OTHER,9HB1/STO -SOFTWARE FINANCED FROM STORAGE BRAND,2078/24C -V5000 SFF Control all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum	<input type="checkbox"/> (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [ADDITIONAL FEE] <input type="checkbox"/> (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

DE-0-49079467-50258558

TRADEMARK  
REEL: 005796 FRAME: 0165

**UCC FINANCING STATEMENT ADDENDUM - COLLATERAL**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT		
9a. ORGANIZATION'S NAME		
HEARTLAND PAYMENT SYSTEMS, INC.		
OR		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX

This FINANCING STATEMENT covers the following collateral  
LLC files this notice as a precautionary filing.

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
Corporation Service Company	8008585294
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
CORPORATION SERVICE COMPANY	
2711 CENTERVILLE ROAD	
SUITE 400	
WILMINGTON DE 19808	

DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 11:17 AM 07/29/2015  
INITIAL FILING # 2015 3275343  
SRV: 151106366

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR				
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS 90 NASSAU ST	CITY PRINCETON	STATE NJ	POSTAL CODE 08542	COUNTRY US
1e. TYPE OF ORGANIZATION		1f. JURISDICTION OF ORGANIZATION		

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME				
OR				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME APPLE FINANCIAL SERVICES				
OR				
3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS PO BOX 35701	CITY BILLINGS	STATE MT	POSTAL CODE 59107	COUNTRY US

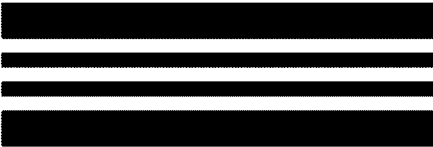
4. This FINANCING STATEMENT covers the following collateral:

All Equipment, described herein or otherwise, leased to or financed for the Debtor by Secured Party under that certain Master Lease Agreement No. 9767997-007 Including all accessories, accessions, replacements, additions, substitutions, add-ons and upgrades thereto, and any proceeds therefrom.

6. <input type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable)	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)	<input type="checkbox"/> All Debtors	<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
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8. OPTIONAL FILER REFERENCE DATA

EFS - Indirect - Technology and Services - 9767997



**UCC FINANCING STATEMENT**  
FOLLOW INSTRUCTIONS

Delaware Department of State  
U.C.C. Filing Section  
Filed: 05:20 PM 10/08/2015  
U.C.C. Initial Filing No: 2015 4590708  
Service Request No: 20150441742

<b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b> GISELLA MELENDEZ 800-331-3282
<b>B. E-MAIL CONTACT AT FILER (optional)</b> EFILING@WOLTERSCLUWER.COM
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> P.O. BOX 29071 GLENDALE, CA 91209-9071 US

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**1. DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
90 NASSAU STREET	NEW JERSEY	NJ	08542	US

**2. DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY):** Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME FORSYTHE/MCARTHUR ASSOCIATES, INC.				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7770 FRONTAGE ROAD	SKOKIE	IL	60077	US

**4. COLLATERAL:** This financing statement covers the following collateral:  
COLLATERAL DESCRIPTION - PLEASE SEE ATTACHED

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative				
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor				
8. OPTIONAL FILER REFERENCE DATA: DE-0-50678636-50579978				

# UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

**18. NAME OF FIRST DEBTOR:** Same as line 1a or 1b on Financing Statement, if line 1b was left blank because Individual Debtor name did not fit, check here

18a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.	
OR	
18b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**19. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (19a or 19b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

19a. ORGANIZATION'S NAME				
OR				
19b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
19c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**20. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (20a or 20b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

20a. ORGANIZATION'S NAME				
OR				
20b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
20c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**21. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (21a or 21b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

21a. ORGANIZATION'S NAME				
OR				
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
21c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**22.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (22a or 22b)

22a. ORGANIZATION'S NAME BANC OF AMERICA LEASING & CAPITAL, LLC				
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
22c. MAILING ADDRESS 135 S. LASALLE STREET	CITY CHICAGO	STATE IL	POSTAL CODE 60603	COUNTRY US

**23.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (23a or 23b)

23a. ORGANIZATION'S NAME				
OR				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
23c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**24. MISCELLANEOUS:**

COMPUTER, DATA PROCESSING AND RELATED EQUIPMENT FURTHER DESCRIBED IN AND SUBJECT TO SCHEDULE AD TO LEASE NO. F94610 A COPY OF WHICH (OR SCHEDULE 1 SHOWING THE SAME EQUIPMENT) IS ATTACHED HERETO AND MADE A PART HEREOF AND ALL PROCEEDS OF SAID EQUIPMENT. THIS FINANCING STATEMENT IS FILED FOR INFORMATIONAL PURPOSES ONLY AND SHALL NOT OF ITSELF BE A FACTOR IN DETERMINING WHETHER OR NOT SAID LEASE IS INTENDED AS SECURITY.

Schedule 1

1. Equipment:

Qty Type Model Serial No. Description

LEASE: 94610 AD  
 MANUFACTURER: CISCO SYSTEMS INC.

Location: 1250 E ARQUES AVE FUJITSU AMERICAN BLDG M4/560, SUNNYVALE, CA 94085-5401  
 2 ASR100 2X-36G

FOX1811GPRJ  
 FOX1810G56C

2	FLSA1-	2X-5-3		UPGRADE FROM 5 GBPS TO 36GBPS
2	SLASR1	-IPB-A		CISCO ASR 1000 IPB TO AES UPGR
2	ASR100	0-SPA		SPA FOR ASR1000; NO PHYSICAL P
4	ASR100	2-PWR-		CISCO ASR1002 AC POWER SUPPLY
2	ASR100	2X-HD-		BLANK COVER FOR ASR1002-S HDD
4	CAB-AC	-RA		POWER CORD, 110V, RIGHT ANGLE
2	M-ASR1	002X-8		CISCO ASR1002-X 8GB DRAM
2	SASR1K	2XUK9-		CISCO ASR1002-X IOS XE UNMERS
6	SPA-1X	10GE-L		CISCO 1-PORT 10GE LAN-PHY SHA

Location: 1 HEARTLAND WAY, JEFFERSONVILLE, IN 47130-5870  
 2 ASR100 2X-36G

FOX1811GPSW  
 FOX1811GPSU

2	FLSA1-	2X-5-3		UPGRADE FROM 5 GBPS TO 36GBPS
2	SLASR1	-IPB-A		CISCO ASR 1000 IPB TO AES UPGR
2	ASR100	0-SPA		SPA FOR ASR1000; NO PHYSICAL P
4	ASR100	2-PWR-		CISCO ASR1002 AC POWER SUPPLY
4	CAB-AC	-RA		POWER CORD, 110V, RIGHT ANGLE
2	ASR100	2X-HD-		BLANK COVER FOR ASR1002-S HDD
2	M-ASR1	002X-8		CISCO ASR1002-X 8GB DRAM
2	SASR1K	2XUK9-		CISCO ASR1002-X IOS XE UNMERS
6	SPA-1X	10GE-L		CISCO 1-PORT 10GE LAN-PHY SHA

Location: 900 VENTURE DR, ALLEN, TX 75013-1197  
 20 FET-10 G=

2	N2K-C2	232PP-		10G LINE EXTENDER FOR FEX
2	N2K-C2	248TF-		N2K 10GE, 2PS, 1 FAN MODULE, 3
8	CAB-9K	12A-NA		CISCO NEXUS 2248TP GE FABRIC E
16	FET-10	G		POWER CORD, 125VAC 13A NEMA 5- 10G LINE EXTENDER FOR FEX
4	N3K-C3	172FA		NEXUS 3172PO FWD AIRFLOW/POR

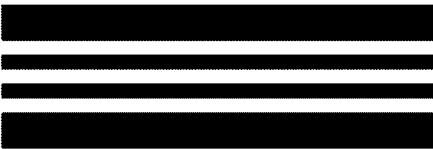
4	N3K-LA	N1K9	NEXUS 3000 LAN ENTERPRISE LICE
16	NXA-FA	N-30CF	NEXUS 2K3K SINGLE FAN, STD AI
2	N6004-	B-24Q	NEXUS 6004 EF CHASSIS 24X40GE
2	N6K-C6	004-AC	NEXUS 6004 CHASSIS ACCESSORY K
12	N6K-C6	004-M-	NEXUS 6004 MODULE BLANK COVER
2	N6KUK9	-602N2	NEXUS 6000 BASE OS SOFTWARE RE
20	CAB-C1	3-C14-	POWER CORD JUMPER, C13-C14 CON
8	N6K-C6	004-FA	NEXUS 6004 FAN MODULE WITH FRO
12	NXA-PA	C-1100	NEXUS 1100W PLATINUM PS, FORWA
4	N6004-	M12Q-B	NEXUS 6004 EF CHASSIS MODULE 1
2	N1K-VL	CPU-32	NEXUS 1000V ESSENTIAL EDITION
2	N77-C7	706-B2	NEXUS 7706 BUNDLE (CHASSIS 1XS
2	N77-VD	C1K9-S	NEXUS 7700 INCREMENTAL VDC LIC
2	N77-SU	P2E	NEXUS 7700 - SUPERVISOR 2 ENHA
4	N77-F2	48XP-2	NEXUS 7700 F2-SERIES 48 PORT 1
4	N77-F3	24FQ-2	NEXUS 7700 F3-SERIES 24-PORT 4
2	N77S2K	9-62	CISCO NX-OS RELEASE 6.2 FOR NE
2	DCNM-L	-N77-K	DCNM FOR LAN ADVANCED LICENSE
2	N77-EL	21K9-S	NEXUS 7700 ENHANCED LAYER 2 LI
2	N77-LA	N1K9-S	NEXUS 7000 LAN ENTERPRISE LICE
12	N77-C7	706-FA	CISCO NEXUS 7700 6-SLOT SWITCH
8	N77-AC	-3KW	NEXUS 7700 - 3.0KW AC POWER SU
8	CAB-75	13AC	AC POWER CORD N. AMERICA
2	N77-SU	P-BLAN	NEXUS 7700 - SUPERVISOR BLANK
2	N77-SB	UN-P2	INCLUDES LAN VDC EL2 TRS & DC
80	QSFP-4	0G-SR-	QSFP40G BIDI SHORT-REACH TRANS
118	SFP-10	G-SR=	10GBASE-SR SFP MODULE
2	ASR100	2X-36G	ASR1002-X BUNDLE WITH 2X10GE
			FOX1811GPRR
			FOX1811GPSQ
2	FLSA1-	2X-5-3	UPGRADE FROM 5 GBPS TO 36GBPS
2	SLASR1	-IPB-A	CISCO ASR 1000 IPB TO AES UPGR
2	ASR100	0-SPA	SPA FOR ASR1000; NO PHYSICAL P
4	ASR100	2-PWR-	CISCO ASR1002 AC POWER SUPPLY



2	AIR-PW	R-CORD		AIR LINE CORD NORTH AMERICA/ U
4	C3KX-P	WR-350	LIT17361Q0P LIT17361Q1V LIT17361PXV LIT173516K7	CATALYST 3K-X 350W AC POWER SU
4	CAB-3K	X-AC		AC POWER CORD FOR CATALYST 3K-
3	CISCO1	921-SE	FTX180382C2 FTX180382C0 FTX180382C1	CISCO1921/K9 WITH 2GE, SEC LIC
3	SL-19-	SEC-K9		SECURITY LICENSE FOR CISCO 19
1	CISCO1	921/K9		C1921 MODULAR ROUTER, 2 GE, 2
4	S190UK	9-1520	FTX180382VE	CISCO 1900 IOS UNIVERSAL
4	SL-19-	IPB-K9		IP BASE LICENSE FOR CISCO 194
1	CISCO3	925-SE		CISCO 3925 SECURITY BUNDLE W/S
1	3900-F	ANASSY	FTX1803AKEU	CISCO 3925/3945 FAN ASSEMBLY (
1	C3900-	SPE100		CISCO SERVICES PERFORMANCE ENG
5	CAB-AC			POWER CORD, 110V
5	ISR-CC	P-EXP		CISCO CONFIG PRO EXPRESS ON RO
1	MEM-39	00-1GB		1GB DRAM (512MB+512MB) FOR CIS
1	MEM-CF	-256MB		256MB COMPACT FLASH FOR CISCO
5	PI-MSE	-PRMO-		INSERT PACKOUT - PI-MSE
1	PWR-39	00-AC		CISCO 3925/3945 AC POWER SUPPL
1	RPS-CO	VER-39		COVER FOR EMPTY 2ND POWER SUPP
1	S39UK9	-15204		CISCO 3925-3945 IOS UNIVERSAL
1	SL-39-	IPB-K9		IP BASE LICENSE FOR CISCO 3925
1	SL-39-	SEC-K9		SECURITY LICENSE FOR CISCO 392
1	SM-D-B	LANK		BLANK FACEPLATE FOR DW SLOT ON
2	SM-S-B	LANK		REMOVABLE FACE PLATE
12	HWIC-B	LANK		BLANK FACE PLATE
1	L-SL-1	9-DATA		DATA E-DELIVERY PAK FOR CISCO
3	PWR-39	00-AC=		CISCO 3925/3945 AC POWER SUPPL
3	WS-X46	48-RJ4		CATALYST 4500 E-SERIES 48-PORT

2. The Equipment described is leased by HEARTLAND PAYMENT SYSTEMS, INC. as Lessee, under Schedule AD, (the "Lease") to Master Lease Agreement No. F94610 dated January 8, 2008.

LESSEE: HEARTLAND PAYMENT SYSTEMS, INC.  
 4000 STATE ST. MASSACHUSETTS, NEW BEDFORD, MA 01854



**UCC FINANCING STATEMENT**  
FOLLOW INSTRUCTIONS

Delaware Department of State  
U.C.C. Filing Section  
Filed: 05:20 PM 10/08/2015  
U.C.C. Initial Filing No: 2015 4590716  
Service Request No: 20150441744

<b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b> GISELLA MELENDEZ 800-331-3282
<b>B. E-MAIL CONTACT AT FILER (optional)</b> EFILING@WOLTERSCLUWER.COM
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> P.O. BOX 29071 GLENDALE, CA 91209-9071 US

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**1. DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
90 NASSAU STREET	NEW JERSEY	NJ	08542	US

**2. DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**3. SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME FORSYTHE/MCARTHUR ASSOCIATES, INC.				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7770 FRONTAGE ROAD	SKOKIE	IL	60077	US

**4. COLLATERAL:** This financing statement covers the following collateral:  
COLLATERAL DESCRIPTION - PLEASE SEE ATTACHED

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative				
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor				
8. OPTIONAL FILER REFERENCE DATA: DE-0-50678119-50579976				

# UCC FINANCING STATEMENT ADDITIONAL PARTY

FOLLOW INSTRUCTIONS

**18. NAME OF FIRST DEBTOR:** Same as line 1a or 1b on Financing Statement, if line 1b was left blank because Individual Debtor name did not fit, check here

18a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.	
OR	
18b. INDIVIDUAL'S SURNAME	
FIRST PERSONAL NAME	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

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OR				
19b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
19c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**20. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (20a or 20b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

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OR				
20b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
20c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**21. ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (21a or 21b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

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OR				
21b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
21c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**22.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (22a or 22b)

22a. ORGANIZATION'S NAME BANC OF AMERICA LEASING & CAPITAL, LLC				
OR				
22b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
22c. MAILING ADDRESS 135 S. LASALLE STREET	CITY CHICAGO	STATE IL	POSTAL CODE 60603	COUNTRY US

**23.  ADDITIONAL SECURED PARTY'S NAME or  ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (23a or 23b)

23a. ORGANIZATION'S NAME				
OR				
23b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
23c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**24. MISCELLANEOUS:**

COMPUTER, DATA PROCESSING AND RELATED EQUIPMENT FURTHER DESCRIBED IN AND SUBJECT TO SCHEDULE AC TO LEASE NO. F94610 A COPY OF WHICH (OR SCHEDULE 1 SHOWING THE SAME EQUIPMENT) IS ATTACHED HERETO AND MADE A PART HEREOF AND ALL PROCEEDS OF SAID EQUIPMENT. THIS FINANCING STATEMENT IS FILED FOR INFORMATIONAL PURPOSES ONLY AND SHALL NOT OF ITSELF BE A FACTOR IN DETERMINING WHETHER OR NOT SAID LEASE IS INTENDED AS SECURITY.

Schedule 1

1. Equipment:	Qty	Type	Model	Serial No.	Description
Location: 1250 E ARQUES AVE FUJITSU AMERICAN BLDG M4/560, SUNNYVALE, CA 94085-5401					
	2	94Y666	9		IBM SYSTEM X 750W HIGH EFFICIE
	4	90Y895	3		IBM 500GB 2.5IN SFF 7.2K 6GBPS
	2	69Y568	1		X3550 M4 ODD CABLE
	2	791432	U		IBM SYSTEM X3550 M4
	2	69Y532	6	SKQ4Z7HC SKQ4Z7BY	INTEL XEON 6C PROCESSOR MODEL
	14	49Y139	7		8GB (1X8GB 2RX4 1.35V) PC3L-10
	8	49Y610	2		IBM 600GB 15K 6GBPS SAS 3.5 G2
	2	81Y448	4		SERVERAID M5100 SERIES 512MB C
	4	90Y390	1		IBM INTEGRATED MANAGEMENT MODU
	4	49Y424	0		INTEL ETHERNET QUAD PORT SERVE
	6	46M090	2		IBM ULTRASLIM ENHANCED SATA MU
	4	69Y119	4		X3650 M4 ODD CABLE
	2	94Y666	8		IBM SYSTEM X 550W HIGH EFFICIE
	2	7915C4	U	SKQ6N4VM SKQ9V43W	X3650 M4 XEON 6C E5-2620 95W 2
Location: 1220 E ARQUES AVE, SUNNYVALE, CA 94085-5401					
	1	7915ED	U		EXPRESS X3650 M4 XEON 6C E5-26
	1	69Y532	8	Q8C3KG	INTEL XEON 6C PROCESSOR MODEL
	2	49Y139	7		8GB (1X8GB 2RX4 1.35V) PC3L-10
	2	90Y864	8		IBM 128GB SATA 2.5IN MLC HS EN
	1	42D051	0		QLOGIC 8GB FC DUAL-PORT HBA FO
	1	49Y798	0		INTEL X520 DUAL PORT 10GBE SFP
	2	46C344	7		IBM - BNT SFP+ TRANSCEIVER
Location: 1 HEARTLAND WAY, JEFFERSONVILLE, IN 47130-5870					
	2	2498-B	80-000		SAN80B 4
	48	2076-2	24-354	107929B 107929D	900GB 6GB SAS 10K 2.5INCH SFF
	12	2498-B	80-280		SFP 8 GBPS SW 8 PACK
	2	94Y666	5		INTEL XEON 8C PROCESSOR MODEL

SKQ9W8MH  
SKQ9W8LY

6	81Y969	0	IBM 1TB 2.5IN SFF HS 7.2K 6GBP
3	94Y666	7	IBM SYSTEM X 900W HIGH EFFICIE
3	69Y119	4	X3650 M4 ODD CABLE
2	7914M2	U	X3550 M4 XEON 8C E5-2690 135W
16	49Y155	9	4GB (1X4GB 1RX4 1.5V) PC3-1280
10	81Y967	0	IBM 300GB 2.5IN SFF HS 15K 6GB
2	94Y666	9	IBM SYSTEM X 750W HIGH EFFICIE
5	46M090	2	IBM ULTRASLIM ENHANCED SATA MU
2	69Y568	1	X3550 M4 ODD CABLE
5	90Y390	1	IBM INTEGRATED MANAGEMENT MODU
1	2076-3	12 001	STORAGE ENGINE PRELOAD
1	2076-3	12 120	FIRST UNIT IN CLUSTER INDICATO
12	2076-3	12 330	2TB 3.5 INCH 7.2K HDD
8	2076-3	12 530	5M FIBER OPTIC CABLE LC-LC
1	2076-3	12 571	10GBE OPTICAL SW SFP 2 PAIRS
2	2076-3	12 600	CACHE 8GB
1	2076-3	12 973	POWER CORD - PDU CONNECTION
2	2076-3	12 980	POWER SUPPLY
1	2076-3	12	STORWIZE V7000 DISK CONTROL EN
2	2076-3	24-000	STORWIZE V7000 10 GBE CONTRSFF
16	2076-3	24-530	5 M FIBER OPTIC CABLE LC LC
2	2076-3	24-571	10GBE OPTICAL SW SFP PAIR
4	2076-3	24-600	CACHE 8 GB
2	2076-3	24-973	POWER CORD PDU CONNECTION
4	2076-3	24-980	AC POWER SUPPLY
2	2076-2	12-000	STORWIZE V7000 EXPANSION 12
24	2076-2	12-330	3TB 3.5 IN. 7.2K NL SAS HDD
4	2076-2	12-540	1 M 6 GB/S EXTERNAL MINI SAS
2	2076-2	12-973	POWER CORD - PDU CONNECTION
4	2076-2	12-980	AC POWER SUPPLY

5	5639-V	M7-000		STORWIZE V7000 SW V7
5	5639-V	M7-580		OTHER MEDIA STORWIZE V7000 SW
24	2076-3	24-351		400 GB 2.5INCH SSD (E MILC)
Location: 900 VENTURE DR SITE ID #9425, ALLEN, TX 75013-1197				
3	2076-2	12	78RECNS 78REVK4 78REVK8	STORWIZE V7000 DISK EXPANSION
36	2076-2	12 330		2TB 3.5 INCH 7.2K HDD
6	2076-2	12 540		1M 6GB/S EXTERNAL MINI SAS
3	2076-2	12 973		POWER CORD - PDU CONNECTION
6	2076-2	12 980		AC POWER SUPPLY
1	2076-3	24		STORWIZE V7000 DISK CONTROL EN
14	2076-3	24 354		900GB 6GB SAS 10K 2.5-INCH SFF
2	2076-2	24		STORWIZE V7000 DISK EXPANSION
48	2076-2	24-354	78REW81 78REPNN	900GB 6GB SAS 10K 2.5INCH SFF
4	2076-2	24-540		1 M 6 GB/S EXTERNAL MINI SAS
2	2076-2	24 973		POWER CORD - PDU CONNECTION
4	2076-2	24 980		AC POWER SUPPLY
2	2498-F	24		IBM SYSTEM NETWORKING SAN248-5
24	2498-F	24 280	10255AN 10255AL	8 GBPS SW SFP+ TRANSCEIVER
8	2498-F	24 581		OM3 CABLE LC/LC 10M
2	2498-F	24 720		FABRIC WATCH
Location: 900 VENTURE DR, ALLEN, TX 75013-1197				
4	90Y895	3		IBM 500GB 2.5IN SFF 7.2K 6GBPS
2	791432	U		IBM SYSTEM X3550 M4
4	69Y532	6	SKQ4Z6TA SKQ4Z6RY	INTEL XEON 6C PROCESSOR MODEL
16	49Y610	2		IBM 600GB 15K 6GBPS SAS 3.5 G2
4	81Y448	4		SERVER RAID M5100 SERIES 512MB C
6	49Y424	0		INTEL ETHERNET QUAD PORT SERVE
4	94Y666	8		IBM SYSTEM X 550W HIGH EFFICIE
4	7915C4	U		X3650 M4 XEON 6C E5-2620 95W 2
			SKQ6NAVN SKQ6R5W	

1	49Y798	0	INTEL X520 DUAL PORT 10GBE SFP
2	46C344	7	IBM - BNT SFP+ TRANSCEIVER
3	8722C2	U	X3750 M4 2X XEON 8C E5-4650 13
			S06X2217
			S06V7328
			S06V7327
6	88Y732	4	INTEL XEON 8C PROCESSOR MODEL
4	90Y864	8	IBM 128GB SATA 2.5IN MLC HS EN
7	42D051	0	QLOGIC 8GB FC DUAL-PORT HBA FO
1	95Y376	2	EMULEX DUAL PORT 10GBE SFP+ VF
3	88Y742	9	IBM DUAL PORT 10GB SFP+ ETHERN
3	88Y737	3	IBM 1400W HE REDUNDANT POWER S
6	49Y421	6	BROCADE 10GB SFP+ SR OPTICAL T
1	7915M2	U	X3650 M4 XEON 8C E5-2690 135W
			SKQ9W8MP
1	94Y668	5	INTEL XEON 8C PROCESSOR MODEL
1	42C178	0	NETXTREME II 1000 EXPRESS DUAL
1	94Y666	7	IBM SYSTEM X 900W HIGH EFFICIE
5	69Y119	4	X3650 M4 ODD CABLE
1	7914M2	U	X3550 M4 XEON 8C E5-2690 135W
7	49Y155	9	4GB (1X4GB 1RX4 1.5V) PC3-1280
4	81Y967	0	IBM 300GB 2.5IN SFF HS 15K 6GB
3	94Y666	9	IBM SYSTEM X 750W HIGH EFFICIE
11	46M090	2	IBM ULTRASLIM ENHANCED SATA MU
3	69Y568	1	X3550 M4 ODD CABLE
8	90Y390	1	IBM INTEGRATED MANAGEMENT MODU
96	KTM-SX	313LLQ	32GB QR LRDIMM 1333MHZ LOW VOL
116	00D496	8	16GB 1X16GB 2RX4 1.5V) PC3-128
4	41Y831	1	IBM USB MEMORY KEY FOR VMWARE
12	42D050	1	QLOGIC 8GB FC SINGLE-PORT HBA
104	49Y156	3	16GB (1X16GB 2RX4 1.35V) PC3L-

2. The Equipment described is leased by HEARTLAND PAYMENT SYSTEMS, INC. as Lessee, under Schedule AC, (the "Lease") to Master Lease Agreement No. F94610 dated January 8, 2008.

LESSEE: HEARTLAND PAYMENT SYSTEMS, INC.  
ADDRESS: 90 NASSAU STREET, NEW JERSEY, NJ 08542





**UCC FINANCING STATEMENT**  
FOLLOW INSTRUCTIONS

Delaware Department of State  
U.C.C. Filing Section  
Filed: 09:00 AM 10/09/2015  
U.C.C. Initial Filing No: 2015 4596127

Service Request No: 20150446019

<b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b> GISELLA MELENDEZ 800-331-3282
<b>B. E-MAIL CONTACT AT FILER (optional)</b> EFILING@WOLTERSCLUWER.COM
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> P.O. BOX 29071 GLENDALE, CA 91209-9071 US

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**1. DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME HEARTLAND PAYMENT SYSTEMS, INC.				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
90 NASSAU STREET	PRINCETON	NJ	75024	US

**2. DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

**3. SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ONE NORTH CASTLE DRIVE	ARMONK	NY	10504	US

**4. COLLATERAL:** This financing statement covers the following collateral:  
ALL OF THE FOLLOWING EQUIPMENT TOGETHER WITH ALL RELATED SOFTWARE, WHETHER NOW OWNED OR  
HEREAFTER ACQUIRED AND WHEREVER LOCATED (ALL AS MORE FULLY DESCRIBED ON IBM CREDIT LLC  
AGREEMENT(S) 007360 INCLUDING ONE OR MORE OF THE FOLLOWING: HPKS/QDP -2X XEON 6 CORE  
2.4GHZ 96GB SERVER ALL ADDITIONS, ATTACHMENTS, ACCESSORIES, ACCESSIONS AND UPGRADES  
THERE TO AND ANY AND ALL SUBSTITUTIONS, REPLACEMENTS OR EXCHANGES FOR ANY SUCH ITEM OF  
EQUIPMENT OR SOFTWARE AND ANY AND ALL PROCEEDS OF ANY OF THE FOREGOING, INCLUDING,  
WITHOUT LIMITATION, PAYMENTS UNDER INSURANCE OR ANY INDEMNITY OR WARRANTY RELATING TO  
LOSS OR DAMAGE TO SUCH EQUIPMENT AND SOFTWARE. IBM CREDIT LLC FILES THIS NOTICE AS A  
PRECAUTIONARY FILING.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative				
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser				
8. OPTIONAL FILER REFERENCE DATA: DE-0-50689485-50582363				

**UCC FINANCING STATEMENT**  
FOLLOW INSTRUCTIONS

Delaware Department of State  
U.C.C. Filing Section  
Filed: 09:01 AM 12/21/2015  
U.C.C. Initial Filing No: 2015 6166754  
Service Request No: 20151455394

<b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b> GISELLA MELENDEZ 800-331-3282
<b>B. E-MAIL CONTACT AT FILER (optional)</b> EFILING@WOLTERSKLUPER.COM
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b>  P.O. BOX 29071 GLENDALE, CA 91209-9071  US

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. **DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

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OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
90 NASSAU STREET	PRINCETON	NJ	75024	US

2. **DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here  and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME IBM CREDIT LLC				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
ONE NORTH CASTLE DRIVE	ARMONK	NY	10504	US

4. **COLLATERAL:** This financing statement covers the following collateral:  
All of the following equipment together with all related software, whether now owned or hereafter acquired and wherever located (all as more fully described on IBM Credit LLC Agreement(s) 011375 including one or more of the following: XOT9/OEM -OEM OTHER,ZQ2U/330 -A10 THUNDER 3030S APPLIANCE,ZQ2U/A50 -A10 NETWORKS AX5000 SERIES APPLIANCE,XSV2/OEM -OEM SERVICES all additions, attachments, accessories, accessions and upgrades thereto and any and all substitutions, replacements or exchanges for any such item of equipment or software and any and all proceeds of any of the foregoing, including, without limitation, payments under insurance or any indemnity or warranty relating to loss or damage to such equipment and software. IBM Credit LLC files this notice as a precautionary filing.

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative				
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor				
8. OPTIONAL FILER REFERENCE DATA: DE-0-51724736-50881069				