

Division of Corporations

H170000003197

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : JAM MARK LIMITED
Account Number : 12000000112
Phone : (305) 789-7758
Fax Number : (305) 789-7799

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
SELINA USA PAYMENTS CORPORATION

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED
2017 JUL 18 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
17 JUL 18 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

S. WARREN

JUL 19 2017

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Selina USA Payments Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 82-1151726
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 5, 2017 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Qualification
(Date first transacted business in Florida, if prior to registration)
(SHE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. Calle 5A Oeste, Casa 8-38, Correg. de San Felipe, Urbanizacion Casco Viejo, Panama
(Principal office address)
Calle 5A Oeste, Casa 8-38, Correg. de San Felipe, Urbanizacion Casco Viejo, Panama
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

9. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Handwritten Signature] Assist. V.P.
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Yoav Gery

Address: Calle 5A Oeste, Casa 8-38, Correg. de San Felipe, Urbanizacion Casco Viejo, Panama

Director: Steven O'Hayon

Address: Calle 5A Oeste, Casa 8-38, Correg. de San Felipe, Urbanizacion Casco Viejo, Panama

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B. OFFICERS

President: Rafael Museri

Address: Calle 5A Oeste, Casa 8-38, Correg. de San Felipe, Urbanizacion Casco Viejo, Panama

Vice President: _____

Address: _____

Secretary: Yoav Gery

Address: Calle 5A Oeste, Casa 8-38, Correg. de San Felipe, Urbanizacion Casco Viejo, Panama

Treasurer: Steven O'Hayon

Address: Calle 5A Oeste, Casa 8-38, Correg. de San Felipe, Urbanizacion Casco Viejo, Panama

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Yoav Gery, Director and Secretary

(Typed or printed name and capacity of person signing application)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SELINA USA PAYMENTS CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SELINA USA PAYMENTS CORPORATION" WAS INCORPORATED ON THE SIXTH DAY OF APRIL, A.D. 2017.

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



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

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SR# 20175283937

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

Authentication: 202901894

Date: 07-18-17

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