Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

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

Email Address:

FLORIDA/FOREIGN LP/LLLP VIA SOLUTIONS, LP

Certificate of Status	0
Certified Copy	0
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Electronic Filing Menu

Corporate Filing Menu

J. Shivers MAY 27 2014

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Via Solutions, LP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Please return all correspondence concerning this matter to:

Madeline G. M. Lovejoy

Contact Person

Fidelity National Financial

Firm/Company

2510 N Redhill Ave

Address

Santa Ana, CA 92705

City, State and Zip Code

madeline.gm.lovejoy@fnf.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Madeline G. M. Lovejov

.949 \622-5050

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees (\$965 Filing Fee and

☐ \$1,008,75 Filing Fees and Certificate of

☐ \$1,052.50 Filing Fees and Certified Copy

☐ \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

\$35 Registered Agent Status

Fee)

STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

	lorida; must contain acceptable suffix.	oposes to register to transact
Pennsylvania 3, 04/02/2004		
State or Country of Formation	Date of Formation	1
4. Federal Employer Identification Number: 20-11	113512	
5. Name of Registered Agent for Service of Process	and Florida Street Address:	
CT Corporation System		
1200 South Pine Island Road		
Plantation, FL 33324		
 I hereby accept the appointment as registered agent of all statutes relative to the proper and complete per my position as registered agent. Mitslo	erformance of my duties, and I am familiar with an	nd accept the obligations of
Sia	nature of Registered Agent	with more
Sign		
7. Principal Office:	8. Malling Address:	SEC.
-	<u>-</u>	TALLAHAY
7. Principal Office:	8. Malling Address:	14 MAY 23 SECHETANA SECHET
7. Principal Office: 1400 Cherrington Pkwy	8. Mailing Address: c/o MGM Lovejoy	3
7. Principal Office: 1400 Cherrington Pkwy	8. Mailing Address: c/o MGM Lovejoy 2510 N Redhill Ave Santa Ana, CA 92705	3
7. Frincipal Office: 1400 Cherrington Pkwy Moon Township, PA 15108 9. If limited partnership is a limited liability limited. 10. Name, principal office address, and mailing add.	8. Mailing Address: c/o MGM Lovejoy 2510 N Redhill Ave Santa Ana, CA 92705 d partnership, check box. dress of each general partner:	23 AM IO: 92
7. Frincipal Office: 1400 Cherrington Pkwy Moon Township, PA 15108 9. If limited partnership is a limited liability limited. 10. Name, principal office address, and mailing add.	8. Mailing Address: c/o MGM Lovejoy 2510 N Redhill Ave Santa Ana, CA 92705 d partnership, check box. dress of each general partner:	23 AM IO: 92
7. Frincipal Office: 1400 Cherrington Pkwy Moon Township, PA 15108 9. If limited partnership is a limited liability limited 10. Name, principal office address, and mailing add Name of General Partner: Via General Part	8. Mailing Address: c/o MGM Lovejoy 2510 N Redhill Ave Santa Ana, CA 92705 d partnership, check box. dress of each general partner: tner, LLC Name of General Partner:	23 AM IO: 92 ASSEE, TLORIDA
7. Frincipal Office: 1400 Cherrington Pkwy Moon Township, PA 15108 9. If limited partnership is a limited liability limited. 10. Name, principal office address, and mailing add.	8. Mailing Address: c/o MGM Lovejoy 2510 N Redhill Ave Santa Ana, CA 92705 d partnership, check box. dress of each general partner: tner, LLC Name of General Partner: KWY Street Address:	23 AM IO: 92 ASSEE, TLORIDA
7. Frincipal Office: 1400 Cherrington Pkwy Moon Township, PA 15108 9. If limited partnership is a limited liability limited 10. Name, principal office address, and mailing add Name of General Partner: Via General Part Street Address: 1400 Cherrington Pk Moon Township, PA	8. Mailing Address: c/o MGM Lovejoy 2510 N Redhill Ave Santa Ana, CA 92705 d partnership, check box. dress of each general partner: tner, LLC Name of General Partner: KWY Street Address:	23 AM IO: 92
7. Principal Office: 1400 Cherrington Pkwy Moon Township, PA 15108 9. If Ilmited partnership is a limited liability limited 10. Name, principal office address, and mailing add Name of General Partner: Via General Part Street Address: 1400 Cherrington Pk Moon Township, PA	8. Mailing Address: c/o MGM Lovejoy 2510 N Redhill Ave Santa Ana, CA 92705 d partnership, check box. dress of each general partner: tner, LLC Name of General Partner: kWy Street Address: Mailing Address:	23 May 10: 92 ASSEE FLORIDA

	Page 1 of 2 Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
1). Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the	e date this document is filed by the Florida Department of State.)
the law of which it is organized.	Meial having custody of the entity's records in the jurisdiction under
Signed this 21 day of WY	of a general partney
The individual signing this document affirm that the facts stated	

Page 2 of 2

\$52,50 \$8.75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

submitted in a document to the Department of State constitutes a third degree felony as provided for in a 817.155, F.S.

Filing Fees: Certified Copy (optional): Certificate of Stutus (optional):

SECRETAIN PRINT 82

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

MAY 22, 2014

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Via Solutions, LP

is duly registered as a Pennsylvania Limited Partnership under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid. TALLAHASSEE FLORIDA



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Carl Children

Secretary of the Commonwealth