

# F00000005704

## TRANSMITTAL LETTER

To: Registration Section  
Division of Corporations

SUBJECT: MULTINATIONAL AUTOMATED CLEARING HOUSE AMERICAS, INC

MJH

(Name of corporation - must include suffix)

Dear Sir or Madam:

00789 - 00659 -

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CARLOS A. LOZANO

(Name of Person)

MACH AMERICAS

(Firm/Company)

1451 WEST CYPRESS CREEK RD. STE # 300

(Address)

FORT LAUDERDALE FLORIDA 33309

(City/State/Zip)

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-10/05/00--01126--001

\*\*\*\*\*78.75 \*\*\*\*\*78.75

Should you need to call someone concerning this matter, please call:

NANCY ECHEGARAY

954 - 489-2710 ext 1643

at ( )

(Name of Person)

(Area Code & Daytime Telephone Number)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 OCT - 5 AM 9:50

### STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☒ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**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. MULTINATIONAL AUTOMATED CLEARING HOUSE AMERICAS, INC  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. STATE OF DELAWARE 3. FEI: 133882392  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/11/1996 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. " UPON QUALIFICATION"  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. \_\_\_\_\_  
(Principal office address)  
1451 WEST CYPRESS CREEK RD. STE. #300  
b. FORT LAUDERDALE -FLORIDA ##33309  
(Current mailing address)
8. \_\_\_\_\_  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: CARLOS A. LOZANO  
Office Address: 1451 CYPRESS CREEK RD STE 300  
FORT LAUDERDALE, Florida 33309  
(Zip code)

**10. 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.*

  
(Registered agent's signature)

11. 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.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 OCT -5 AM 9:50

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: MICHEL SCHLUTER

Address: 1 BOULEVARD DR. CHARLES MARX

L- 2130 LUXEMBOURG

Director: DAVID WORCESTER

Address: 75 ROUTE DE LONGWY

L- 8080 BERTRANGE - LUXEMBOURG

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: CARLOS A. LOZANO

Address: 1451 WEST CYPRESS CREEK RD. STE 3 300

FORT LAUDERDALE, FLORIDA 33309

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

CARLOS A. LOZANO

14. \_\_\_\_\_

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

*State of Delaware*  
*Office of the Secretary of State*

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MULTINATIONAL AUTOMATED CLEARING HOUSE AMERICAS, INC." 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 EIGHTH DAY OF SEPTEMBER, A.D. 2000. ---

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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



  
Edward J. Freel, Secretary of State

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AUTHENTICATION: 0664075

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DATE: 09-08-00