

F03000002366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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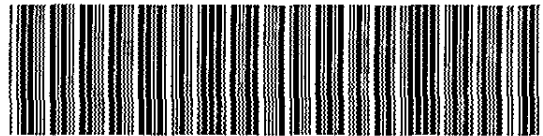
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
03 MAY 12 PM 2:47
STATE
TALLAHASSEE, FLORIDA

CT CORPORATION

May 12, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
03 MAY 12 PM 2:47
STATE
TALLAHASSEE, FLORIDA

Re: Order #: 5844453 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

SITEL Customer Care, Inc. (ON)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R. Bryan
Manager Fulfill Ctr
Connie_Bryan@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**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.*

FILED
MAY 12 PM 2:47
TALLAHASSEE, FLORIDA

1. SITEL Customer Care, 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. Ontario 3. 98-0391878
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3/26/01 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. 333 Ontario Street, St. Catharines, Ontario L2R 5L3
(Principal office address)
165 Lawrence Bell Drive, Williamsville, NY 14221
(Current mailing address)
8. collection agency via interstate business
(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: C T Corporation System
Office Address: 1200 South Pine Island Road,
Plantation, , Florida 33324
(City) (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.

C T Corporation System

By: KATHA Kevin A. Saburua, Asst. Secy.
(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.

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

A. DIRECTORS

Chairman: SEE ATTACHED

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SEE ATTACHED

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13.  4/30/03

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

14. Christoffer M. Knutt, VP

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

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03 MAY 12 PM 3:14
TALLAHASSEE, FLORIDA

SITEL CUSTOMER CARE, INC.
OFFICERS AND DIRECTORS

OFFICERS

President-Roger E. Carney
3587 Parkway Lane
Norcross, Georgia 30092

Vice President-Christoffer M. Knutt
333 Ontario Street
St. Catherines, Ontario L2R 5L3

Secretary-Steven A. Copeland
333 Ontario Street
St. Catherines, Ontario L2R 5L3

Treasurer-Karen Blinkhorn
3587 Parkway Lane
Norcross, Georgia 30092

DIRECTORS

Director: Roger E. Carney
3587 Parkway Lane
Norcross, Georgia 30092

Director: Christoffer M. Knutt
333 Ontario Street
St. Catherines, Ontario L2R 5L3

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SITEL
TALLAHASSEE, FLORIDA

Request ID: 005140021
Demande n° :
Transaction ID: 20857984
Transaction n° :
Category ID: CT
Catégorie :

Province of Ontario
Province de l'Ontario
Ministry of Consumer and Business Services
Ministère des Services aux consommateurs et aux entreprises
Companies and Personal Property Security Branch
Direction des compagnies et des sûretés mobilières

Date Report Produced: 2003/05/09
Document produit le :
Time Report Produced: 11:18:16
Imprimé à :

CERTIFICATE OF STATUS ATTESTATION DU STATUT JURIDIQUE

FILED
MAY 12 PM 2:47
TALLAHASSEE, FLORIDA

This is to certify that according to the
records of the Companies and Personal
Property Security Branch

D'après les dossiers de la Direction des
compagnies et des sûretés mobilières, nous
attestons que la société

SITEL CUSTOMER CARE, INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario)

001469148

is a corporation incorporated,
amalgamated or continued under
the laws of the Province of Ontario.

est une société constituée, prorogée ou née
d'une fusion aux termes des lois de la
Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

MARCH 26 MARS, 2001

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

MAY 09 MAI, 2003


Director
Directrice