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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428

FOREIGN PROFIT QUALIFICATION

Monogram Money Services, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

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Corporate Filing

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RECEIVED
03 OCT 10 PM 1:32
DIVISION OF CORPORATIONS

AND
FILED
03 OCT 10 PM 3:38
IT. B. WATSON
T. H. ASSESSOR
FLORIDA

10-10

**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. Monogram Money Services, 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. Delaware 3. 20-0264346
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9/10/03 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 10/15/03
(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. 1600 Summer Street, Stamford, CT 06927
(Principal office address)

(Current mailing address)

8. Money transmission services
(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: CT 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.

By: _____

CT Corporation System
(Registered agent's signature)

**SALVINA AMENTA-GRAY
SPECIAL ASSISTANT SECRETARY**

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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Jonathan Donahue

Address: 1600 Summer Street, Stamford, CT 06927

Director: Garrick Hoadley

Address: 1600 Summer Street, Stamford, CT 06927

B. OFFICERS

President: Jonathan Donahue

Address: 1600 Summer Street, Stamford, CT 06927

Vice President: Garrick Hoadley, VP and Secretary

Address: 1600 Summer Street, Stamford, CT 06927

Secretary: Garrick Hoadley

Address: 1600 Summer Street, Stamford, CT 06927

Treasurer: Ed Viscount, VP and Treasurer

Address: 1600 Summer Street, Stamford, CT 06927

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

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

14. Garrick Hoadley, Vice President and Secretary
(Typed or printed name and capacity of person signing application)

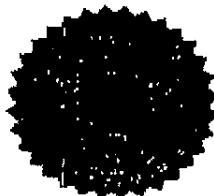
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MONOGRAM MONEY SERVICES, 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 NINTH DAY OF OCTOBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3702243 2300

AUTHENTICATION: 2680993

030650341

DATE: 10-09-03