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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

Colinstar E-Payment Services Inc.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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| Page Count | 05 |
| Estimated Charge | \$70.00 |

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DIVISION OF CORPORATION

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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. Coinstar E-Payment Services Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Kansas 3. 68-0594383
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 09/30/2004 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 10/08/2004
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1800 114th Ave SE, Bellevue, WA 98004
(Principal office address)

same
(Current mailing address)

8. Roseller of prepaid and related electronic payment services and any other lawful purposes.
(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 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.

CT Corporation System

By: [Signature]

(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:

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Division of Corporations

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Donald R. RenschAddress: 1800 114th Ave SEBellevue, WA 98004

Director: _____

Address: _____

B. OFFICERS *SEE ATTACHMENT*President: David W. ColeAddress: 1800 114th Ave SEBellevue, WA 98004Vice President: Stephen J. VorleysAddress: 1800 114th Ave SEBellevue, WA 98004Secretary: Donald R. RenschAddress: 1800 114th Ave SE Bellevue, WA 98004Treasurer: Brian V. TurnerAddress: 1800 114th Ave SE Bellevue, WA 98004
 DIVISION OF REVENUES
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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. David W. Cole

(Signature of Director or Officer listed in number 12 of the application)

14. David W. Cole, President

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

Attachment to Florida

Officers & Directors

-
- | | | |
|------|-------------------|---------------------|
| 1. | Full Name: | Donald R. Rensch |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | Secretary |
| | Director's Title: | Other Director |
| | Business Address: | 1800 114th Ave SE |
| | City: | Bellevue |
| | State: | WA |
| | ZIP Code: | 98004 |
| | | |
| 2. | Full Name: | David W. Cole |
| | Officer/Director: | Officer |
| | Officer's Title: | President |
| | Business Address: | 1800 114th Ave SE |
| | City: | Bellevue |
| | State: | WA |
| | ZIP Code: | 98004 |
| | | |
| 3. | Full Name: | Stephen J. Verleye |
| | Officer/Director: | Officer |
| | Officer's Title: | Vice President |
| | Business Address: | 1800 114th Ave SE |
| | City: | Bellevue |
| | State: | WA |
| | ZIP Code: | 98004 |
| | | |
| 4. | Full Name: | Brian V. Turner |
| | Officer/Director: | Officer |
| | Officer's Title: | Treasurer |
| | Business Address: | 1800 114th Ave SE |
| | City: | Bellevue |
| | State: | WA |
| | ZIP Code: | 98004 |
| | | |
| 5. | Full Name: | Richard C. Deck |
| | Officer/Director: | Officer |
| | Officer's Title: | Assistant Treasurer |
| | Business Address: | 1800 114th Ave SE |
| | City: | Bellevue |
| | State: | WA |
| | ZIP Code: | 98004 |

1.
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CIVILIAN DEPT. OF JUSTICE

**STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
RON THORNBURGH**

To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas,
do hereby certify that, according to the records of this office,

COINSTAR E-PAYMENT SERVICES INC.
KANSAS FOR PROFIT CORPORATION
Business Entity ID Number: 3690534

was filed in this office on September 30, 2004 and has complied with the
applicable provisions of the laws of the State of Kansas and on this date is in
good standing and authorized to transact business or to conduct its affairs
within this state.

Dated: 11/02/2004

For Validation:

Certificate ID: **22774**

To validate this certificate, visit the following
web site, enter this certificate ID, then follow
the instructions displayed.

<https://www.accesskansas.org/businessentity/validate.html>



Signed:

RON THORNBURGH
SECRETARY OF STATE