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(Re	equestor's Name)	
(Ac	(dress)	
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PICK-UP	☐ WAIT	MAIL
(Bi	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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January 31, 2007

Division of Corporations New Filing Section 2661 Executive Center Circle Tallahassee, FL 32301



Re: <u>Application by Foreign Corporation for Authority to Transact Business in Florida for Sage Payment Solutions, Inc.</u>

Dear Sir/Madam:

Please find enclosed for filing the following documentations:

- 1. Application by Foreign Corporation for Authority to Transact Business in Florida;
- 2. Certificate of Good Standing; and
- 3. Check # 321264 in the amount of \$70.00 representing the filing fees.

Once the application is filed, please send a filed stamped copy to my attention. A self-address stamped envelope is included for your convenience. Thank you for your assistance in this matter. Please feel free to contact me at 949-450-3886 should you have any questions or concerns.

Very truly yours,

While Shaw

Mike Pham

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Sage Payment Solutions	s, Inc.
5000011	ation - must include suffix)
Dear Sir or Madam:	r
The enclosed "Application by Foreign Corporation "Certificate of Existence," and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this ma	tter to the following:
Mike Pham	
(Nam	e of Person)
Sage Software, Inc.	
	(Company)
56 Technology Drive	
·	ddress)
Irvine, CA 92618	
(City/Sta	ate and Zip code)
For further information concerning this matter, plea	se call:
Mike Pham at (94	9 , 450-3886
	ea Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing 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 & \$87.50 Filing Fee, Certified Copy 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. Sage Pay	yment Solutions, Inc.	•
(Enter name of c	corporation; must include "INCORPORATED, forp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
ше,, со., с	orp, me, co, or corp.")	
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
2. Delaware	3.	01-0665536
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4. April 5, 20	002 5.	Perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. Upon fi	lling approval	
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)
_{7.} 3841 Gree	en Hills Village Drive, Suite 2	•
	(Principal office add	· · · · · · · · · · · · · · · · · · ·
56 Techn	ology Drive, Irvine, CA 92618	
	(Current mailing add	ress)
8. Credit	Card Processing	
(Purpose(s	s) of corporation authorized in home state or co	· · · · · · · · · · · · · · · · · · ·
9. Name and street	et address of Florida registered agent: (P.C	D. Box NOT acceptable)
Name:	C T Corporation System	·
Office Address:	1200 South Pine Island Ro	<u>ad</u>
	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.

M.T. FITZPATRICK
ASSISTANT SECRETARY

(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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FICERS See attached Officers/Directo	are list
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14. James L. Edwards, CFO & Secretary

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

Officers / Directors

Name:

Sage Payment Solutions, Inc.

Incorporated:

April 5, 2002 in Delaware

FEIN#:

01-0665536

Officers

President

William G. Wade

3841 Green Hills Village Dr., Suite 210

Nashville, TN 37215

Chief Financial Officer

and Secretary

James L. Edwards

3841 Green Hills Village Dr., Suite 210

Nashville, TN 37215

Assistant Secretary

Melody Williams Dapp 56 Technology Drive

Irvine, CA 92618

Directors

Ronald F. Verni 56 Technology Drive Irvine, CA 92618

James R. Eckstaedt 56 Technology Drive Irvine, CA 92618

Paul Harrison North Park

Paul A. Walker North Park

Newcastle upon Tyne

Newcastle upon Tyne

UK

UK

NE13 9AA

NE13 9AA

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SAGE PAYMENT SOLUTIONS, 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 TWENTY-FIFTH DAY OF JANUARY, A.D. 2007.





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Darriet Smith Hindan

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5384551

DATE: 01-25-07