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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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SECRETARY OF STATE

APPROVES



## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Transax International Limited
(Name of corporation - must include suffix)
Dear Sir or Madam:
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:
Stephen Walters
(Name of Person)
Transax International Limited
(Firm/Company)
950 S. Pine Island Rd., Suite A-150
(Address)
Plantation, FL 33324
(City/State and Zip code)
For further information concerning this matter, please call:
Stephen Walters at ( 888 ) 317-6984 Ext. 702
(Name of Person) (Area 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 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.

(If name unavai	·	me adopted for the purpose of transacting business in Florida)
Colorado		3. 90-0287423
· •	under the law of which it is incorporated)	(FEI number, if applicable)
. 1/28/1987	e of incorporation)	5. Perpetual  (Duration: Year corp. will cease to exist or "perpetual")
(Date	e of meorporation)	(Duration: Tear corp. will cease to exist or "perpetual")
 . 950 S. Pin		is in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability) address)
	(Principal office a	ddress)
Plantation	, FL 33324	77
	(Current mailing a	
(Purpose(s	•	country to be carried out in state of Florida)
	et address of Florida registered agent: (F	'.O. Box <u>NOT</u> acceptable)
Name:	Adam Wasserman	<del></del>
Office Address:	950 S. Pine Island Rd., S	buite A-150
	Plantation	, Florida 33324
	(City)	(Zip code)
Having been nam lesignated in this	application, I hereby accept the appoin omply with the provisions of all statutes	rvice of process for the above stated corporation at the place atment as registered agent and agree to act in this capacity. Is relative to the proper and complete performance of my disposition as registered agent.

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.

APPROVEL AND FILED

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

08 DEC 24 PM 3: 23
TARY OF STATE
TALLAHASSEE, FLORIDA
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***************************************
L 33324
ional officers and/or directors.
application)
plication)

APPRUVED AND FILED

08 DEC 24 PM 3: 29

SECRETARY OF STATE

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE

I, Mike Coffman, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

#### TRANSAX INTERNATIONAL LIMITED

is a Corporation formed or registered on 01/28/1987 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19871708203.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 12/01/2008 that have been posted, and by documents delivered to this office electronically through 12/08/2008 @ 06:15:50.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 12/08/2008 @ 06:15:50 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7242012.



M.k. Coffm

Secretary of State of the State of Colorado

\*\*\*\*End of Certificate\*\*\*\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <a href="http://www.sos.state.co.us/bit/CertificateSearchCriteria.do">http://www.sos.state.co.us/bit/CertificateSearchCriteria.do</a> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <a href="http://www.sos.state.co.us/click Business">http://www.sos.state.co.us/click Business</a> Center and select "Frequently Asked Ovestions"