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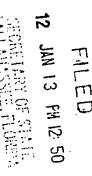
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)	)		
(Document Number)			
Certified Copies Certificates of	f Status		
Special Instructions to Filing Officer:			





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### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: Automated Services ar	nd Processina. Inc.	
Name of corporation - must include suffix		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by	n for Authorization to Transact Business in Florida," Standing" and check are submitted to register the usiness in Florida.	
Please return all correspondence concerning this m	atter to the following:	
Paul Rutz		
Nam	e of Person	
Automated Services and Processing, Inc.		
Firm/Company		
1421 E. Broad St., Ste. 323		
	Address	
Fuquay-Varina, NC 27526		
•	ate and Zip code	
asap09@nc.rr.com		
E-mail address: (to be u	sed for future annual report notification)	
For further information concerning this matter, plea	ase call:	
Don Morrison at ( 919 ) 802-6301		
	rea Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
\$70.00 Filing Fee \$\int \text{S78.75 Filing Fee & Certificate of Status}	\$78.75 Filing Fee & Certified Copy  \$87.50 Filing Fee, Certified Copy  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.	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
	Worldwide Funds Transfer Inc.  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida).
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2.	NC 3 FIN 27-1182749 53.
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(State or country under the law of which it is incorporated)  April 20, 2009  (Date of incorporation)  5. Purper tual  (Duration: Year corp. will cease to exist or "perpetual")
•	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	~/a
٠.	(Date first transacted business in Florida, if prior to registration)
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7	2171 Bud Lipscamb Rd. Willow Springs, WC 27592 (Principal office address)
	• •
-	1421 É. Broad St. Ste. 323 Figury - Varina, ~ 6 27,726 (Current mailing address)
	(Current mailing address)
8.	A.S.A.P manages overspa customer purchases visna the ACH
٠.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  Danking system.
	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
	Name: Donald L. Morrison
Of	fice Address: 6108 Raven Run
_	Lakeland, Florida 33809 (City) (Zip code)
	(City) (Zip code)
10	Devistand agent's accentance
	Registered agent's acceptance;  wing been named as registered agent and to accept service of process for the above stated corporation at the place

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.

(Registère d'agent's signature)

<sup>11.</sup> 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:	FILED
A. DIRECTORS	12 JAN 13 PM 12: 51
Chairman:	SECRETARY OF STATE
Address:	TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	•
Director:	
Address:	
Director:	•
Address:	
B. OFFICERS	
President: Paul Rutz	
Address: 2171 Bud Lipscomb Rd	
Willow Springs, NC 27592	
Vice President: Don Morrison	
Address: 6108 Raven Run	
Lakeland, FL 33809	
Secretary: Paul Rutz	
Address: 2171 Bud Lipscomb Rd, Willow Springs, NC 27592	
Treasurer: Don Morrison	
Address: 6108 Raven Run, Lakeland, FL 33809	·
NOTE: If necessary, you may attach an addendum to the application listing additional additional actions are addendumated to the application and additional actions are addendumated as a second action and additional actions and additional actions are addendumated as a second action and additional actions are added as a second action and additional actions are added as a second action and additional actions are added as a second action and additional actions are added as a second action action.	tional officers and/or directors.
13. President Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 about true and that he or she is aware that false information submitted in a document third degree felony as provided for in s.817.155, F.S.	
14. Paul Rutz, President	
(Typed or printed name and capacity of person signing ap	oplication)



## NORTH CAROLINA Department of the Secretary of State

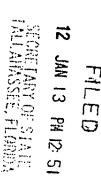
#### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### AUTOMATED SERVICES AND PROCESSING, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 20th day of April, 2009, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.







IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of December, 2011.

Elaine I. Marshall

Secretary of State