

FL200000-34 18

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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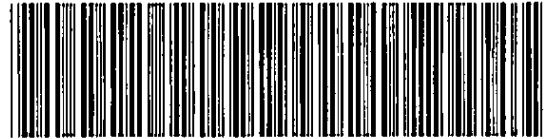
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

10/24/21

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Zelis Payments Inc.

(Name of Corporation)

DOCUMENT NUMBER: F120000003418

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vanessa Mauge

(Name of Person)

Zelis Healthcare

(Firm/Company)

Two Concourse Pkwy., Suite 300

(Address)

Atlanta, Ga 30328

(City/State and Zip code)

For further information concerning this matter, please call:

Vanessa Mauge

at (404) 250- 7693

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) ☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

Zelis Payments Inc.

(Name of Corporation)

F120000003418

(Document Number of Corporation (if known))

Delaware, 04/26/2011

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

2 Crossroads Drive

(Mailing Address)

Bedminster NJ, 07921

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Edward Fargis

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Edward Fargis

(Typed or printed name of person signing)

21 OCT 19 PM 12/3/2020

(Date)

EVP, General Counsel & Secretary

(Title of person signing)

FILING FEE \$35



March 2, 2021

Attn: Tracy L. Lemieux
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Sent via Regular Mail

Reference: Letter Number 621A00000375

Dear Ms. Lemieux:

On the behalf of Zelis Payments, LLC, I, Edward C. Fargis, Executive Vice President and General Counsel, hereby consent to the use of the "Zelis Payments" name to support the previously submitted application to authorize Zelis Payments, LLC, a foreign limited liability company, to transact business in the State of Florida.

Regards,

A handwritten signature in black ink, reading "Edward Fargis". The signature is written in a cursive, flowing style.

Edward C. Fargis
Executive Vice President and General Counsel
Zelis Payments, LLC