

FK4000000055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

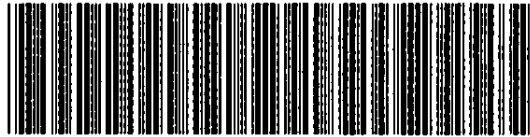
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200254571672

12/18/13--01021--010 **78.75

FILED
14 JAN -2 PM 3:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

W13-69240

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SIMPLE PAYMENT SOLUTIONS INC

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," or "Certificate of Good Standing" 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:

RALF F HEYER

Name of Person

HEYER & ASSOCIATES EA PA

Firm/Company

147 ALHAMBRA CIRCLE STE 131

Address

CORAL GABLES, FL 33134

City/State and Zip code

RFH@HEYERINC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RALF F HEYER

Name of Person

at (**786**) **693-9358**

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

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

14 JAN -2 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

December 19, 2013

RALF F HEYER
147 ALHAMBRA CIR SUITE 131
CORAL GABLES, FL 33134

SUBJECT: SIMPLE PAYMENT SOLUTIONS INC
Ref. Number: W13000069240

We have received your document for SIMPLE PAYMENT SOLUTIONS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 813A00028842

**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. **SIMPLE PAYMENT SOLUTIONS INC**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. **DELAWARE**

(State or country under the law of which it is incorporated)

3. **46-3850148**

(FEI number, if applicable)

4. **10/04/2013**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **12/15/2013**

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

7. **1101 BRICKELL AVE 8TH FLOOR, SOUTH TOWER, MIAMI, FL 33131**

(Principal office address)

1101 BRICKELL AVE 8TH FLOOR, SOUTH TOWER, MIAMI, FL 33131

(Current mailing address)

8. TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH CORPORATIONS MAY BE ORGANIZED UNDER THE GENERAL CORPORATION LAW OF SAID STATE.

(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:

HEYER & ASSOCIATES EA PA

Office Address:

147 ALHAMBRA CIRCLE STE 131

CORAL GABLES

(City)

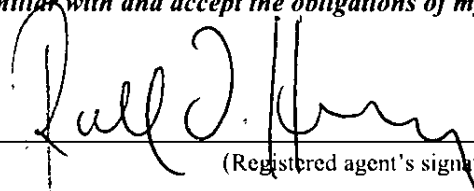
33134

(Zip code)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.


(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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: **SAM RAZUK FIHLO**

Address: **1101 BRICKELL AVE, 8TH FLOOR, MIAMI, FL 33131**

Director: _____

Address: _____

B. OFFICERS

President: **SAM RAZUK FILHO**

Address: **1101 BRICKELL AVE, 8TH FLOOR, MIAMI, FL 33131**

Vice President: _____

Address: _____

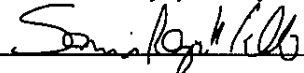
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. **SAM RAZUK FILHO, DIRECTOR AND PRESIDENT**

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

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TALLAHASSEE FLORIDA

Delaware

PAGE 1

The First State

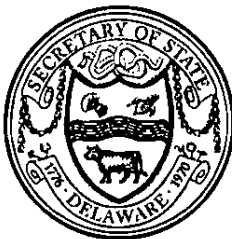
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIMPLE PAYMENT SOLUTIONS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF DECEMBER, A.D. 2013.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

5405677 8300

131384768

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0953391

DATE: 12-06-13