

F 14000003415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

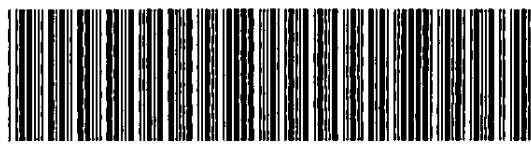
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

8/15/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PayFlex Systems USA, 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:

LILY FAHNESTOCK

Name of Person

Firm/Company

290 LEEDY WAY W.

Address

CHAMBERSBURG, PA 17202

City/State and Zip code

FAHNESTOCKL@AETNA.COM

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

For further information concerning this matter, please call:

LILY FAHNESTOCK

at (860) 273-6695

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

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TALLAHASSEE, FLORIDA

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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

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. PayFlex Systems USA, 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. Nebraska 3. 91-1774434
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/11/1997 5. Perpetual
 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 10802 Farnam Drive, Suite 100, Omaha, NE 68154
 (Principal office address)

151 Farmington Avenue, RW61, Hartford, CT 06156
 (Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

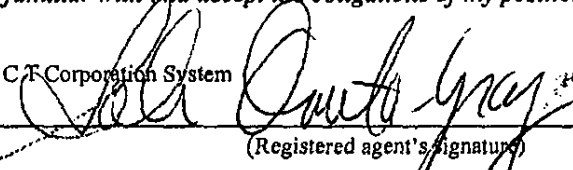
Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
 (City) (Zip code)

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9. 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.

By: C T Corporation System

 (Registered agent's signature)

SALMA ANENTA-GRAY
SPECIAL ASSISTANT SECRETARY

10. 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.

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

A. DIRECTORS

Chairman: E. Steven Doyle

Address: 10802 FARNAM DRIVE SUITE 100, OMAHA, NE 68154

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: E. Steven Doyle

Address: 10802 FARNAM DRIVE SUITE 100, OMAHA, NE 68154

Director: Brandon Wood

Address: 10802 FARNAM DRIVE SUITE 100, OMAHA, NE 68154

B. OFFICERS

President: BRANDON WOOD

Address: 10802 FARNAM DRIVE SUITE 100, OMAHA, NE 68154

Vice President: JERRY J. BELLIZZI

Address: 151 FARMINGTON AVENUE, HARTFORD, CT 06156

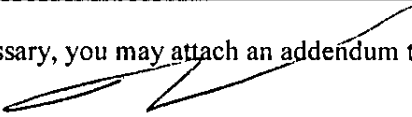
Secretary: EDWARD C. LEE

Address: 151 FARMINGTON AVENUE, HARTFORD, CT 06156

Treasurer: ELAINE R. COFRANCESCO

Address: 151 FARMINGTON AVENUE, HARTFORD, CT 06156

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

12. 
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.

13. EDWARD C. LEE (Secretary)
(Typed or printed name and capacity of person signing application)

STATE OF NEBRASKA

United States of America, } ss.
State of Nebraska }

Secretary of State
State Capitol
Lincoln, Nebraska

I, John A. Gale, Secretary of State of the
State of Nebraska, do hereby certify that

PAYFLEX SYSTEMS USA, INC.,

**was duly incorporated under the laws of this state on February 11, 1997 and
do further certify that no occupation taxes assessed are unpaid and no
occupation taxes are delinquent; Articles of Dissolution have not been filed
and said Corporation is in existence as of the date of this certificate.**

*This certificate is not to be construed as an endorsement,
recommendation, or notice of approval of the entity's financial
condition or business activities and practices.*

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TALLAHASSEE, FLORIDA

In Testimony Whereof,



I have hereunto set my hand and
affixed the Great Seal of the
State of Nebraska on this date of

August 6, 2014

John A. Gale
Secretary of State