F14000004099

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | Idress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| • | | |
| | | |
| | | |

Office Use Only

W14-55965



200264227492

09/30/14--01030--007 **650.00

09/11/14--01003--008 **70.00

FILED

SECRETARY OF STATE

T 10/01/14



14 SEP 29 AM 11: 25

FLORIDA DEPARTMENT OF STATE Division of Corporations TALLAHASSEE, FLORIDA

September 12, 2014

JUSTIN K. BREWER TRIALCARD, INCORPORATED 6501 WESTON PARKWAY, STE. 370 CARY, NC 27513

SUBJECT: TRIALCARD, INCORPORATED

Ref. Number: W14000055965

We have received your document for TRIALCARD, INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

Please use the complete Corporate Name of the Registered Agent as it is listed in our database.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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.

Regulatory Specialist II Letter Number: 614A00019633
New Filing Section

COVER LETTER

| | Filing Section | | | | |
|-----------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------|
| SUBJECT: | TrialCa | rd, Incorporate | ed | | |
| SUDJECT. | • • • • • • • • • • • • • • • • • • • • | Name of corporat | | include suffix | |
| Dear Sir or M | adam: | | | | |
| "Certificate of | f Existence," | by Foreign Corporation or "Certificate of Good Sorporation to transact bus | Standing" a | nd check are sul | |
| Please return | all correspon | dence concerning this ma | tter to the | following: | |
| Justin K | . Brewe | r | | | |
| | | Name | of Person | | |
| TrialCar | d, Incor | porated | | | |
| | | Firm/C | Company | | |
| 6501 W | eston P | arkway, Ste 37 | 0 | | |
| Cary, N | C 27513 | | ldress | | |
| | . | City/Stat | e and Zip o | ode | |
| jbrewer@ | | | | • | |
| | | E-mail address: (to be use | ed for futur | e annual report | notification) |
| For further in | formation cor | cerning this matter, pleas | se call: | | |
| Justin B | rewer | at (919 | , 84 | 5-0774 | |
| Name | of Person | Are | ea Code & | Daytime Teleph | one Number |
| | | | | | |
| New I Divisi Clifto 2661 | EET/COURI Filing Section on of Corpor n Building Executive Ce nassee, FL 32 | ations nter Circle | | MAILING A New Filing Se Division of Co P.O. Box 632 Tallahassee, F | ection orporations 7 |
| Enclosed is a | check for the | following amount: | | | |
| ■ \$70.00 Fil | ng Fee | \$78.75 Filing Fee & Certificate of Status | | S Filing Fee & ied 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.

| , | ble in Florida, enter alternate corporate name | adopted for the purpose of transacting | g business in Florida) | | |
|-------------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------------|------------------------|--|--|
| North Carolina 3. | | 52-2251120 | | | |
| 4/24/200 |). | (FEI number, if applicable) Perpetual | | | |
| (Date 4/9/2013 | of incorporation) | (Duration: Year corp. will cease to | exist or "perpetual") | | |
| | | n Florida, if prior to registration) 502, F.S., to determine penalty liabili | ty) | | |
| • | (Principal office add ton Parkway, Suite 370c Ca (Current mailing add | ress) Ary, NC 27513 | | | |
| Name and stree | t address of Florida registered agent: (P. US Corporation Agents, 1 | | 14 SE SECRE | | |
| fice Address: | 13302 Winding Oaks Ct. St | e A | P 29 | | |
| | Tampa | , Florida 33612 | | | |
| | (City) | (Zip code) | WHII: 12 | | |
| D!-4. 1 | ent's acceptance: ed as registered agent and to accept serv | | _ | | |

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:

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. Charles W. Reuben



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

TRIALCARD INCORPORATED

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 27th day of February, 2008, 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.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of September, 2014.

6 laine I. Marshall

Secretary of State