Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000029134 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: C T CORPORATION SYSTEM Account Name

Account Number: FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				
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# FOREIGN PROFIT/NONPROFIT CORPORATION TSYS Advisors, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

## **COVER LETTER**

TO: New Filing Sc Division of Co			·
SUBJECT: TSYS A	Advisors, Inc.		
	Name of corpor	ation - must include suffix	
Dear Sir or Madam:			
"Certificate of Existen	ation by Foreign Corporation nce," or "Certificate of Good Ign corporation to transact but	Standing" and check are su	nct Business in Florida," braitted to register the
Please return all corre	spondence concerning this n	natter to the following:	
Eric LaForge			
	Nam	e of Person	
Total System Services, I	<u></u>	·	
	Firm/	Company	
One TSYS Way			
	A	Address	
Columbus, GA 31901	<u></u>		
	City/Sta	ate and Zip code	
elaforge@tsys.com			
•	E-mail address: (to be u	sed for future annual report	nottiteation)
For further information	a concerning this matter, plea	nse call;	
Eric LaForge	at ( <sup>706</sup>	644-3507	
Name of Person		rea Code & Daytime Teleph	one Number
New Filling Sea		MAILING A New Filing Se	ection
Division of Co Clifton Buildin		Division of Co P.O. Box 6327	
	e Center Circle	Tallahassee, F	
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

TSYS Advisors, In	c.			
	oration; must include "INCORPORATED ," "Inc," "Co," or "Corp.")	,* *COMPANY,	" "CORPORATION,"	HASSEF.
If name unavailable	in Florida, enter alternate corporate name	adopted for the p	purpose of transacting business in I	Plorida)
Georgia	3.	27-2121361		
(State or country un	der the law of which it is incorporated)		(FEI number, if applicable)	*:
3/16/2010	5.	Perpetual	•	
(Date of i	ncorporation)		er corp. will cease to exist or "perp	etu al")
upon filin	g	•		
ame and street ad  Name:	(Principal office add  (Current mailing add  (gress of Florida registered agent: (P.C  C T Corporation System  1200 South Pine Island Road	ross)	ceptable)	
	Plantation	, Florida	33324	
	(City)		(Zip code)	
gistered age <mark>nt's</mark> I <i>t been named a</i> s	registered agent and to accept service loation, I hereby accept the appointm	ent as registere lative to the pro	ed agent and agree to act in this oper and complete performance	s capaci
aled in this appl r agree to compl , and I am famili	rporation System	my posttion as	regues eu ugem.	

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. Nar	mes and business addresses of officers and/or directors:		
	RECTORS		
Chairma	Paul Todd		
\ddress:	One TSYS Way Columbus GA 31901	E> /	
		25	<del></del>
<del></del> -		1 -	8
ice Cha	airman:	77 + 7 77 + 7 777 - 4	1
ddress:	: <del></del>		<u> </u>
irector:	Dorenda Weaver	92	
ddress:	One TSYS Way, Columbus GA 31901 .	€ - 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1	_
		****	
rector;			
dress:			
esident: Idross:	One TSVS Way Cohumbus GA 21007		
o Presi	ident; None		
dress:	One TSYS Way, Columbus, GA 31901		
ui C33,			
retary:	Kathy Moates		
iress:	One TSYS Way, Columbus, GA 31901		
asurer;	Dorenda Weaver		
	One TSYS Way Columbus GA, 31901		
TE:	If necessary, you may attach an addendum to the application listing additional officers and/or dir	ectors.	
	Signature of Director or Officer	<del></del>	
true a	er or director signing this document (and who is listed in number 12 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of Siegree felony as provided for in s.817.155, F.S.		
	y Moates, Secretary		
	(Typed or printed name and capacity of nerson signing application)		

## STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER DATE INC/AUTH/FILED : March 16, 2010 JURISDICTION PRINT DATE

: 10019928 : Georgia

: February 04, 201

### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### TSYS ADVISORS, INC. A Domestic For-Profit Corporation

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp Secretary of State

Tracking #: EhpcHGs2