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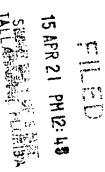
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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300 TradeCenter, Suite 7000 | Woburn, MA 01801-7419 Tel: 781.904.2700 | Fax: 781.904.2701 | www.mclane.com

MANCHESTER CONCORD PORTSMOUTH WOBURN, MA

Direct Dial: (781)904-2703

Email: elizabeth.robinson@mclane.com

April 13, 2014

#### <u>VIA CERTIFIED MAIL WITH RETURN</u> <u>RECEIPT</u>

Florida Department of State New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Basware, Inc.

To Whom it May Concern:

Enclosed please find an Application by Foreign Corporation for Authorization to Transact Business in Florida on behalf of Basware, Inc. with a check in the amount of \$70.00 which is the required filing fee.

Kindly acknowledge receipt of this filing by date stamping the enclosed copy of this letter and returning it to my attention. A self-addressed, postage pre-paid return envelope is provided for your convenience.

Should you require further documentation or information, please do not hesitate to call me directly at 781-904-2703. Thank you and kind regards.

Very truly yours,

Elizabeth Robinson

Paralegal

Corporate Department

DKM/ecr

87320

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300 TradeCenter, Suite 7000 | Woburn, MA 01801-7419 Tel: 781.904.2700 | Fax: 781.904.2701 | www.mclane.com

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Both Aduran

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Paralegal

Corporate Department

DKM/ecr

87320

#### **COVER LETTER**

	w Filing Sections					
	<b>D</b>	are, Inc.				
SUBJECT	:		e of corpora	tion -	must include suffix	
Dear Sir or	Madam:		-			
"Certificate	of Existence	on by Foreign ( e," or "Certifica n corporation to	te of Good	Standi	ng" and check are sub	ct Business in Florida," omitted to register the
Please retur	n all corresp	ondence concer	ning this ma	atter te	the following:	
Elizabe	eth Rob	inson				
<del></del>			Name	of Pe	rson	, <u></u>
McLan	e, Graf	Raulers	on & M	iddl	eton, P.A.	
	· <u>-</u>		Firm/C	Compa	iny	
300 Tr	adeCer	iter, Suite	7000			
Wobur	n, MA C	1801	A	ddress		
	, <u></u>		City/Sta	te and	Zip code	
elizabet	th.robins	son@mcla	ne.com			
		E-mail addre	ss: (to be us	ed for	future annual report r	notification)
For further i	information (	concerning this	matter, plea	se cal	1:	
Elizabe	eth Rob	inson	at (781	,	907-2703	
Nai	me of Persor		_ ,		de & Daytime Telepho	one Number
New Div Clif 266 Tall	v Filing Sect ision of Corpton Building 1 Executive ahassee, FL	Center Circle 32301			MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations
Enclosed is		he following an  \$78.75 Fili Certificate	ng Fee &		578.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

(Enter name of	e, Inc.		
	corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	
(If name unavail	lable in Florida, enter alternate corporate name		ss in Florida)
Delawar	3.	98-0383758	
(State or count 10/11/02	ry under the law of which it is incorporated)	(FEI number, if applicable) Perpetual	•
	e of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual")
<del></del>		n Florida, if prior to registration)	
60 L ong 5		502, F.S., to determine penalty liability)	
oo Long r	Ridge Road, Stamford, CT (Principal office add		
60 Long R	Ridge Road, Stamford, CT 0	*	
	(Current mailing add	.,	
			₹ →
Name and street	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	SEE A
Name:	Corporation Service Comp	any	APR PR
CC 4.1.1	1201 Hays Street		2
ffice Address:		22204	PH IZ:
	Tallahassee	, Florida 32301	
	(City)	(Zip code)	
	ent's acceptance:		
	ed as registered agent and to accept serv application, I hereby accept the appoint		
	omply with the provisions of all statutes		ormance of my
	familiar with and accept the obligations of	oj my position as registerea agent.	
ities, and I am f			
ities, and I am f	S- D-	Sonya L. Cordel	II .

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.

hairman:  ddress:  ddress:  ddress:  ddress:  ddress:  ddress:  Esa Tihila  60 Long Ridge Road  Stamford, CT 06902  Niclas Rosenlew  60 Long Ridge Road  Stamford, CT 06902  OFFICERS  Esa Tihila  ddress:  Esa Tihila  Do Long Ridge Road  Stamford, CT 06902  OFFICERS  Esa Tihila  ddress:  Esa Tihila  Do Long Ridge Road  Stamford, CT 06902  Do Long Ridge Road, Stamford, CT 06902	Address:  Director: Esa Tihila  60 Long Ridge Road  Stamford, CT 06902  Niclas Rosenlew  60 Long Ridge Road  Stamford, CT 06902  8. OFFICERS  resident: Esa Tihila  60 Long Ridge Road  Stamford, CT 06902  8. OFFICERS  resident: Color Ridge Road  Stamford, CT 06902	
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Signature of Director or Officer		
e officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated here	Signature of Director or Officer	
e true and that he or she is aware that false information submitted in a document to the Department of State constitu	ne officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated	

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

## Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BASWARE, 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 SEVENTEENTH DAY OF MARCH, A.D. 2015.

15 APR 21 PH 12: 43

3576301 8300

150322896

AUTHENTY CATION: 2208921

DATE: 03-17-15

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