F15000005658

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



700279965227

12/18/15--01007--024 **78.75

15 DEC 18 PH 4: 24

DEC 23 2015 Y SULKER

1115 8171/1



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2015

EUGENE S KAUZLARICH 600 8TH AVE WEST #203 PALMETTO, FL 34221 US

SUBJECT: ADVANTIX PAYMENT SYSTEMS INC.

Ref. Number: W15000081314

We have received your document for ADVANTIX PAYMENT SYSTEMS INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

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 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) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 315A00026540

COVER LETTER

_	tration Section ion of Corporation	ne			
	Advantix Paymer				
SUBJECT:		Name of corporat	ion -	must include suffix	
Dear Sir or M	adam:				
"Certificate of	f Existence," or "		Standi	ing" and check are sub	et Business in Florida," mitted to register the
Please return a Eugene S. Kau	•	ce concerning this ma	itter to	o the following:	
	···	Name	of Pe	erson	
Advantix Payn	nent Systems Inc.				
		Firm/C	ompa	any	
600 8th Ave W	est, #203				
		Ac	ddress	3	
Palmetto, FL 3	4221				
		City/Stat	e and	Zip code	
Ginok@Merch	antService.com				
	E-m	ail address: (to be us	ed for	r future annual report n	otification)
For further in	formation concer	ning this matter, plea	se cal	II:	
Eugene S. Kau	zlarich	941 at (822-8001	
Namo	e of Person	Area C	Code	Daytime Telepl	none Number
Regis Divisi Clifto 2661	EET/COURIER tration Section ion of Corporation in Building Executive Center hassee, FL 3230	ns Circle		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection prporations
Enclosed is a	check for the foll	owing amount:			
□ \$70.00 Fil	ing Fee \$\sqrt{\$'\chi_0'}	78.75 Filing Fee & ertificate 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.

	ent Systems Corporation		
(If name unavaila	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting busing	ness in Florida)
Delaware	3	38-3985717	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
December 8, 20	5		
(Date	of incorporation)	(Date of duration, if other than po	erpetual)
January 1, 2016	(Date first transacted business in F		
600 8th Ave Wes	(SEE SECTIONS 607.1501 & 607.1502 t, #203, Palmetto, FL 34221	2, F.S., to determine penalty liability) office address)	DEC 18
		,	TA PR
	(Current mailing	address, if different)	#:24 DRIDA
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	·
Name:	Eugene S. Kauzlarich		
ffice Address:	600 8th Ave West, #203	<u> </u>	
	Palmetto	34221 , Florida	
	(City)	(Zip code)	

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.

(Registered agent's signature)

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. DIR	ECTORS Finance S. Kaurdariah			
Chairmar				
Address:	600 8th Ave West, #203 Palmetto, FL 34221			
Vice Cha			<u>-</u>	
Address:	600 8th Ave West, #203			
i _	Palmetto, FL 34221			
Director:	Adam A. Johanningmeier			
Address:	600 8th Ave West, #203			
	Palmetto, FL 34221	5		
Director:	James M. Joyce	TT C	5 DE	
Address:	600 8th Ave West, #203	55	<u>C</u>	Sa vega
Augitas.	Palmetto, FL 34221	Ci.	8	i. "I.,
B. OFFI	ICERS	70		ye anece
	Eugene S. Kauzlarich	227	կ։ շլ	,
President: Address:	600 8th Ave West, #203		<u> </u>	
	Palmetto, FL 34221			
Vice Presi	Julie L. Kauzlarich dent:			
Address:	600 8th Ave West, #203			
	Palmetto, FL 34221			
Secretary:	Eugene S. Kauzlarich			
•	600 8th Ave West, #203, Palmetto, FL 34221			
Treasurer:	Eugene S. Kauzlarich			
	600 8th Ave West, #203, Palmetto, FL 34221			
	f necessary, you may attach an addendum to the application listing additional officers and	/or director	·s	
	ddendum Attached	o, uncolor	۵,	
The office	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the or the is aware that false information submitted in a document to the Department			
-	gree felony as provided for in s.817.155, F.S. ne S. Kauzlarich, President & Chairman of the Board	. L		
13. <u>Lugeri</u>	(Typed or printed name and capacity of person signing application)			·····-

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ADVANTIX PAYMENT SYSTEMS, 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 TWENTY-SECOND DAY OF

DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ADVANTIX PAYMENT SYSTEMS, INC." WAS INCORPORATED ON THE EIGHTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 10671390

Date: 12-22-15

5902182 8300 SR# 20151496405

Gino Kauzlarich

From:

Gino Kauzlarich Thursday, December 17, 2015 3:38 PM Sent:

To: Gino Kauzlarich Subject: Officer Addemdum

B. OFFICERS ADDENDUM

Chief Information Officer: Adam A. Johanningmeier Address: 600 8th Ave West, #203, Palmetto FL 34221

Vice President of Sales: James M. Joyce

Address: 600 8th Ave West, #203, Palmetto FL 34221