P16000005332

(Address)				
, ,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



800292688538

SECRETARY OF STATE TALLAHASSEE, FLORIDA

30 -01 NA 10- 030

SERVICE ON THE COMPANY OF THE COMPAN

D. SCOTT DEC 2 2016 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 384363 8111371

AUTHORIZATION

COST LIMIT : \$87.50

ORDER DATE: November 29, 2016

ORDER TIME : 3:15 PM

ORDER NO. : 384363-020

CUSTOMER NO: 8111371

FOREIGN FILINGS

NAME: CREDIFY FINANCE CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

YX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

	Registration Section Division of Corporations			
SUBJEC	Credify Finance Corporation			
002021		f corporation	- must include suffix	
Dear Sir	or Madam:			
"Certifica	osed "Application by Foreign Co ate of Existence," or "Certificate erenced foreign corporation to tr	of Good Stan	ding" and check are subm	
Please ret	turn all correspondence concerni Curran	ng this matter	to the following:	
		Name of	Person	
Credify Fi	inance Corporation			
		Firm/Com	pany	
425 Califo	ornia Street, Suite 600		•	
		Addre	SS	
San Franc	isco, CA 94104			
·		City/State a	nd Zip code	
licensing@	@credify.com			٠ 🏎
	E-mail address	(to be used f	or future annual report no	tification)
For further	er information concerning this m	atter, please o	all:	E - 29
Thomas Curran		415 at (805-6658	
1	Name of Person	Area Cod	Daytime Telepho	one Number STATE
R C C 2	TREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, FL 32301	S:	MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Enclosed	is a check for the following amo	unt:		
\$70.00	0 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

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.	Credify Finance Corporation
	Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
	Credify Finance Corporation
	If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2.	Delaware 81-2807376 3
4.	(State or country under the law of which it is incorporated) (FEI number, if applicable) 5.
6.	(Date of incorporation) (Date of duration, if other than perpetual)
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 25 California Street, suite 600, San Francisco, CA 94104
7	(Principal office address)
	(Current mailing address, if different)
	(Current manning address, it different)
_	
ð.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name:
Of	ice Address:
	Tallahassee 32301 Florida 5
	(City) (Zip code) 音音 8
He de fu	Registered agent's acceptance: ving been named as registered agent and to accept service of process for the above stated corporation at the place ignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I ther agree to comply with the provisions of all statutes relative to the proper and complete performance of my ies, and I am familiar with and accept the obligations of my position as registered agent.
	Melissa Zender
	Corporation Service Company Asst. Vice President By:
	(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. DIRE	CCTORS
Chairman:	Renaud Laplanche
4.11	425 California Street, suite 600, San Francisco, CA 94104
_	
Vice Chair	rman:
Address:	
_	
Director:	
Address: .	
Director:	
B. OFFI	CERS
President:	Renaud Laplanche
Address:	425 California Street, suite 600, San Francisco, CA 94104
	<u> </u>
Vice Presi	dent:
Secretary:	Jeffrey Bogan
Address:	425 California Street, suite 600, San Francisco, CA 94104
Treasurer:	
Address:	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	
	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein
are true a	nd that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S.
	Jeffrey Bosan, Secretary (Typed or printed name anticapacity of person signing application)
	(Typed or winted name anticapacity 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 "CREDIFY FINANCE CORPORATION" 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-SIXTH DAY OF SEPTEMBER, A.D.

2016.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CREDIFY FINANCE CORPORATION" WAS INCORPORATED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

Authentication: 203057846

Date: 09-26-16

6049832 8300

SR# 20165940379