

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.

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To:				
		Corporations		
	Fax Number	: (850)617-6383		
From	:			
	Account Name		ON SYSTEM	
		er : FCA0000000023		
	Phone			
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FEB 1 7 2017

Electronic Filing Menu

Corporate Filing MoSa. YOUNG Help

## COVER LETTER

TO:		tration Section of Cor							
SUBJ	ECT:	FIS Risk a	nd S	ecurity Services	. Inc.				
						on -	must include suffix		
Dear S	Sir or M	ladam:							
"Certi	ficate o	f Existenc	e," o		of Good S	tand	ling" and check are sub	et Business in Florida," mitted to register the	
Please	return	all corresp	ond	ence concernin	g this mat	iter 1	to the following:		17 FEB
					Name	of P	erson		15
	<u>-</u>				Firm/C	omp	pany (1)		— 張 8:
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wanda	smith@	ffisglobal.co	om		City/State	e an	d Zip code		-
				-mail address:	(to be use	d fo	or future annual report r	notification)	
For fu	rther in	formation	conc	erning this ma	itter, pleas	e ca	ili:		
	Nam	e of Person	<u> </u>	ε	at ( Area C	ode	Daytime Telep	hone Number	
	Regis Divis Clifto 2661	EET/COU tration Section of Cor on Building Executive hassee, FL	ction pora S Cen	tions ter Circle	:		MAILING A Registration S Division of Co P.O. Box 6323 Tallahassee, F	ection orporations 7	
Enclos	sed is a	check.for	the f	ollowing amou	mt:				
<b>□</b> \$70	0.00 Fil	ing Fee	0	\$78,75 Filing Certificate of			\$78.75 Filing Fee & Certifled Copy	\$87.50 Filing Fee, Certificate of Stat 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.

(If name unavail-	able in Florida, enter alternate corpora	ite name i	adopted for the purpose of transacting business in Florida)	•
Delaware		3.	47-3754134	
(State or countr	y under the law of which it is incorpor		(FEI number, if applicable)	_
04/17/2015		5.	Perpetual	_
(Date	of incorporation)		(Date of duration, if other than perpetual)	-
. Upon Qualificat	tion	_		
,,	(SEE SECTIONS 607,1501	& 607.15	Florida, if prior to registration) 102. F.S., to determine penalty liability)	1112
7. 601 Riverside Av	enue, Tower Bldg., Jacksonville, FL			
	•	(Princip	al office address)	-
				_
same	10		16 10 mm	-
same	(Curre	ent mailin	ig address, if different)	_ :
	(Curre et address of Florida registered age C T Corporation System			_ :
3. Name and stree	et address of Florida registered age			_ :
3. Name and <u>stree</u> Name:	et address of Florida registered age C T Corporation System		D. Box NOT acceptable)	C 55.
3. Name and <u>stree</u> Name:	et address of Florida registered age C T Corporation System 1200 South Pine Island Road			_ ;
Name and street Name: Office Address:  Registered aghaving been namelesignated in this	CT Corporation System  1200 South Pine Island Road  Plantation  (City)  ent's acceptance: and as registered agent and to accept the acceptancy with the provisions of all standing with and accept the obligion.	ept servi	D. Box NOT acceptable) , Florida 33324  (Zip code)  The code of process for the above stated corporation at the content as registered agent and agree to act in this capellative to the proper and complete performance of the complete performance of	e pl
Name and street Name: Office Address:  Registered aghaving been namelesignated in this	CT Corporation System  1200 South Pine Island Road  Plantation  (City)  ent's acceptance: and as registered agent and to acceptance to application, I hereby accept the comply with the provisions of all standliar with and accept the obliging CT Corporation System	ent: (P.C ept servi appointn tatutes r ations of	D. Box NOT acceptable) , Florida 33324  (Zip code)  The code of process for the above stated corporation at the content as registered agent and agree to act in this capellative to the proper and complete performance of the complete performance of	e pla

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. DIRECTORS	
Chairman: SEE ATTACHMENT	
Address:	
Vice Chairman:	
Address:	
Ninetan.	
Director:	
Address:	
	7
Director:	
Address:	· · · · · · · · · · · · · · · · · · ·
B. OFFICERS	35°
President: SEE ATTACHMENT	
Address:	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Vice President:	
Address:	
Sceretary:	
Address:	
Treasurer:	
Address;	
NOTE: If necessary, your first attach an addendum to the application listing additional officers and/or dir	ectors
The IE. It here say, some in additional to the application having additional officers are on the	obtera.
12	
Signature of Director or Officer	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the facts are true and that he or she is aware that false information submitted in a document to the Department of St a third degree felony as provided for in s.817.155, F.S.	
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts are true and that he or she is aware that false information submitted in a document to the Department of St	

Report Name: Management Structure

Entity Name: FIS Risk and Security Services, Inc.

Nema	Title	Title Role
Mayo, Marc M.	Director	Director
Oates, Michael P.	Director	Director
Curley, Charles R. Jr.	Senior Vice President, Deputy General Counsel and Assistant Corporate Secretary	Officer
Daughtrey, Virginia	Sr. Vice President of Finance and Treasurer	Officer
Gopalakrishnan, Raja	Executive Vice President	Officer
Jabbour, Anthony M	Corporate Executive Vice President, Chief Operating Officer	Officer
Mayo Marc M.	Executive Vice President, Chief Legal Officer and Corporate Secretary	Officer
Norcross, Gary A.	President and Chief Executive Officer	Officer
Oates, Michael P.	Corporate Executive Vice President and Chief Administrative Officer	Officer
Vasileff, Ann	Senior Vice President and Chief Tax Officer	Officer
Woodall, James W.	Corporate Executive Vice President, Chief Financial Officer	Officer

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

DELAWARE, DO HEREBY CERTIFY "FIS RISK AND SECURITY SERVICES, 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 SIXTEENTH DAY OF FEBRUARY,

A.D. 2017.

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

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

WSIC STATES

5731013 8300

SR# 20170972895

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

Authentication: 202052700

Date: 02-16-17