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10/3/18/05

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 417761 7367362

AUTHORIZATION :

COST LIMIT : \$ 7**6/3**0

ORDER DATE: September 28, 2018

ORDER TIME : 11:32 AM

ORDER NO. : 417761-025

CUSTOMER NO: 7367362

FOREIGN FILINGS

NAME: PAYFORMANCE SOLUTIONS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO: Registration	n Section Corporations							
	ormance Solutions, Inc.							
SUBJECT:		-,						_
	Name	of corporati	on - mu	t include suffix				_
Dear Sir or Madam	:							
"Certificate of Exis	lication by Foreign Co tence," or "Certificate reign corporation to to	of Good St	anding"	and check are su	act Business bmitted to re	in Flor egister (rida," the	
Please return all cor Tracy M. Lawyer	respondence concerni	ng this mat	ter to the	following:				
Altarum Institute		Name o	of Person)		,		_
3520 Green Court, Su	iite 300	Firm/Co	mpany				-	-
		Ado	fress					-
Ann Arbor, MI 4810	5							,
legal@altarum.org		City/State	and Zip	code		: - · · · · · · · · · · · · · · · · · ·	BCT -	
	E-mail address	: (to be used	d for fut	ure annual report	notification)	- 		- }
For further informat	ion concerning this m	atter, please	e call:				∆ 1: 3	1,
Jacqueline Livernois		734 at (30	302-4672		,	Ü	
Name of Po		Area Co	ode	Daytime Telep	hone Numb	er		
Registration Division of Clifton Buil	Corporations ding tive Center Circle	S:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7			
Enclosed is a check	for the following amo	unt:						
□ \$70.00 Filing Fed	e 🗆 \$78.75 Filing Certificate o			75 Filing Fee & fied Copy			f 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. Payformance Solutions, Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable) (State or country under the law of which it is incorporated) 03/31/2017 (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3520 Green Court, Suite 300, Ann Arbor, MI 48105 (Principal office address) 3520 Green Court, Suite 300, Ann Arbor, MI 48105 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City)

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.

Corporation Service Company

By: Company

Asst. Vice President

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 Lincoln T. Smith						
	uite 300, Алл Arbor, MI	48105				
Address:						
Daniel Armij		·				
Vice Chairman:		10105				
Address:	uite 300, Ann Arbor, MI	48105				
					 	
Director:						
Address:						<u> </u>
Director:						
Address:						
B. OFFICERS						
Lincoln T. Smith						
President:3520 Green Court, S						
Address:Ann Arbor, MI 481	05			7	嚼	
	· · · · · · · · · · · · · · · · · · ·				보	TY
Vice President:				<u> </u>	1	1
Address:				<u> </u>		-
Tracy M. Lawyer				·. ··	<u>></u>	(mails
Secretary:	24.000 4.4.1.267	40105	-··		 —بب	
Address:	Suite 300, Ann Arbor, MI	48105		·	<u></u>	
David Robertson Treasurer:						
	uite 300, Ann Arbor, MI					
NOTE: If necessary, you m	av attach an addendum	to the applicat	ion listing addition	nal officers and/o	r directo	ers.
12.	-					
	Signatur	re of Director of				
The officer or director signifier true and that he or she is						
a third degree felony as prov					or braic	oonstitutes
Tracy M. Lawyer, Secreta		_	And Mi	TION .		
13(Ty	ped or printed name and	l capacity of pe	erson signing appli	cation)		· · · -

Page 1

Delaware The First State

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

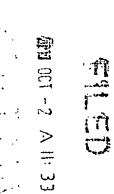
DELAWARE, DO HEREBY CERTIFY "PAYFORMANCE SOLUTIONS, INC." IS DULY

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-SIXTH DAY OF SEPTEMBER, A.D.

2018.





Authentication: 203493679

Date: 09-26-18

6365497 8300 SR# 20186829860