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(F	Requestor's Name)
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(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

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CORPORATE

When you need ACCESS to the world

ACCESS, ____

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	хх	FILING	FOREI	IGN	· · · · · · · · · · · · · · · · · · ·	
1.		HEALTHEQUITY, INC. (CORPORATE NAME AND DOCUME)	NT #)			<u> </u>
2.		(CORPORATE NAME AND DOCUME)	NT #)			5.03
3.		(CORPORATE NAME AND DOCUME	NT #)			
4.		(CORPORATE NAME AND DOCUMEN	NT #)			
5.		(CORPORATE NAME AND DOCUMEN	NT #)		<u>-</u>	
6.		(CORPORATE NAME AND DOCUMEN	NT #)			
	CIAI TRU	L CTIONS:				

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. HEALTHEQUITY, INC.						
(Enter name of c	corporation; must include "INCORPORATED," " corp," "Inc," "Co." or "Corp.")	COMPANY." "CORPORATION,"				
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting business i	n Florida)			
_{2.} DELAWA		52-2383166				
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)				
4. 9/18/200	25.					
(Date	of incorporation)	(Date of duration, if other than perpetu	al)			
6. upon filing						
_a 15 West S	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, Cenic Pointe Dr. Suite 400 Dra	F.S., to determine penalty liability)				
/	(Principal office s					
	(Current mailing ac	Idress, if different)	2020			
8. Name and stree	t address of Florida registered agent: (P.O. B	ox NOT acceptable)	· · ·			
Name:	REGISTERED AGENT SOLUTIONS, INC	- · · · · · · · · · · · · · · · · · · ·	16			
Office Address:	155 Office Plaza Dr. Suite A	_	· ·			
	Tallahassee	- , _{Florida} 32301	€.			
	(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.

Mackenzie Hart, Asst. Secretary

(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.

A. DIRECTORS							
□Chairman	□Chairman Name: TED BLOOMBERG □Vice Chairman Address:		Name: EVELYN DILSAVER Address: 15 West Scenic Pointe Dr. Suite 400				
□Vice Chairman							
□Director							
Draper, UT 84020		□ President	Draper, UT 84020				
□Vice President		□Vice President					
☐ Secretary	☐ Treasurer	□ Secretary	□Treasurer				
■Other EVP	■Other COO	Other					
□Chairman □Vice Chairman	Name: FRANK CORVINO Address:	□Chairman □Vice Chairman	Name: JON KESSLER Address:				
Director	15 West Scenic Pointe Dr. Suite 400	■Director	15 West Scenic Pointe Dr. Suite 400				
□President	Draper, UT 84020	□President	Draper, UT 84020				
□Vice President		□ Vice President					
□Secretary	□Treasurer	□Secretary	□Treasurer				
□Other	□Other	□Other Chief Exec	cutive Officer				
□Chairman □Vice Chairman	Name: ADRIAN DILLON Address: 15 West Scenic Pointe Dr. Suite 400	□Chairman □Vice Chairman	Name: ANGELIQUE HILL Address:				
■Director	-	□Di re ctor	-				
□President	Draper, UT 84020	□President	Draper, UT 84020				
□Vice President		□Vice President					
☐ Secretary	Treasurer	☐ Secretary	□Treasurer				
🖺 Other	Other	Other EVP OPER	ATIONS Other				
The officer or direct she is aware that fars. 8.817.155, F.S.	Use an attachment to report more than six (6). The a added to the index when filing your Florida Departs the Labbar Signature of Director Signing this document (and who is listed in num lise information submitted in a document to the Depart Islano Ladd (EVP General Counsel and Corporation Ladd (EVP General Counsel and Corporation)	r or Officer ber 11 above) affirms the artment of State constitut	not form.				
13	(Typed or printed name and capacity of person signing application)						

- 11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors:
- 7) Adam Hostetter (EVP Chief Marketing Officer)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 8) Delano Ladd (EVP General Counsel and Corporate Secretary)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 9) Debra McCowan (Director)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 10) Darcy Mott (EVP Chief Financial Officer)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 11) Stephen Neeleman (Founder, Vice Chairman, President, Director)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 12) William Otten (EVP Sales)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 13) Ian Sacks (Director)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 14) Robert Selander (Director)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 15) Larry Trittschuh (EVP Chief Security Officer)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020
- 16) Gayle Wellborn (Director)
- 15 West Scenic Pointe Dr. Suite 400 Draper, UT 84020



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

DELAWARE, DO HEREBY CERTIFY "HEALTHEQUITY, 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 JUNE, A.D. 2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HEALTHEQUITY, INC." WAS INCORPORATED ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2002.

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

10 10 m



Authentication: 203116258

Date: 06-16-20

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