

F23000003585

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

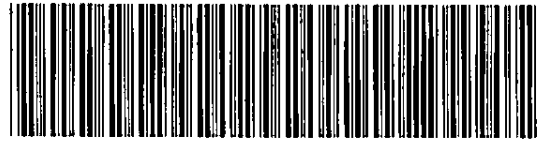
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W23000084265

Office Use Only



400410280244

2023 JUN 14 AM 10:25

RECEIVED  
FBI  
TALLAHASSEE

RECEIVED  
2023 JUN 14 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 17 2023  
Brumblay



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 15, 2023

CSC

**RESUBMIT**

Please give original  
submission date as file date.

SUBJECT: SOFI BANK, NATIONAL ASSOCIATION  
Ref. Number: W23000084265

We have received your document for SOFI BANK, NATIONAL ASSOCIATION and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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.

Andrea Andrews  
Regulatory Specialist II

Letter Number: 823A00013608



2023 JUN 16 PM 2:10



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations  
From: Alexxis Weiland-Sorenson  
Ext: 61592  
Date: 06/14/23  
Order #: 1217173-3  
Re: SoFi Bank, National Association  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:  
120000000195

AUTH:

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', is written over the word 'AUTH:'.

Please take the following action:

File in your office on basis  
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SoFi Bank, National Association

\_\_\_\_\_  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Noemi Pasillas

\_\_\_\_\_  
Name of Person

SoFi Technologies, Inc.

\_\_\_\_\_  
Firm/Company

234 1st St.

\_\_\_\_\_  
Address

San Francisco, CA 94105

\_\_\_\_\_  
City/State and Zip code

licensing@sofi.org

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person                      at (\_\_\_\_\_)                      \_\_\_\_\_  
Area Code                      Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate 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.*

1. SOFI BANK N.A., CORP  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- N/A  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Utah 3. 68-0098368  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/2/2022 5. N/A  
(Date of incorporation) (Date of duration, if other than perpetual)
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2750 E Cottonwood Parkway Suite 300 Cottonwood Heights, UT 84121  
(Principal office street address)
- N/A  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

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.*

Corporation Service Company

By:

Eylina Bahor  
Assistant Vice President

(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

2023 JUN 14 AM 10:25

**A. DIRECTORS**

☐ Chairman Name: Chad Borton  
☐ Vice Chairman Address: 2750 E Cottonwood Pkwy.  
☐ Director Suite 300 Cottonwood Heights, UT 84121  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Jon Auxier  
☐ Vice Chairman Address: 2750 E Cottonwood Pkwy.  
☐ Director Suite 300 Cottonwood Heights, UT 84121  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other Chief Financial Officer ☐ Other \_\_\_\_\_

☐ Chairman Name: Paul Mayer  
☐ Vice Chairman Address: 2750 E Cottonwood Pkwy.  
☐ Director Suite 300 Cottonwood Heights, UT 84121  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other Head of Strategy and Operations ☐ Other \_\_\_\_\_

☐ Chairman Name: Robert Lavet  
☐ Vice Chairman Address: 2750 E Cottonwood Pkwy, Ste 300  
☐ Director Suite 300 Cottonwood Heights, UT 84121  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other Chief Legal Officer ☐ Other \_\_\_\_\_

☐ Chairman Name: Aaron Webster  
☐ Vice Chairman Address: 2750 E Cottonwood Pkwy, Ste 300  
☐ Director Suite 300 Cottonwood Heights, UT 84121  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other Chief Risk Officer ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. *Robert Lavet*  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Robert Lavet  
(Typed or printed name and capacity of person signing application)



Utah Department of Commerce  
Division of Corporations & Commercial Code  
160 East 300 South, 2nd Floor, PO Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Toll Free: (877) 526-3994 Utah Residents  
Fax: (801) 530-6438  
Web Site: <http://www.commerce.utah.gov>

05/24/2023  
12716444-014205242023-1848752

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## CERTIFICATE OF EXISTENCE

Registration Number: 12716444-0142  
Business Name: SOFI BANK N.A., CORP  
Registered Date: June 09, 2022  
Entity Type: Corporation - Domestic - Profit  
Status: Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (**unless Delinquent**); and, that Articles of Dissolution have not been filed.



Leigh Veillette  
Director  
Division of Corporations and Commercial Code



Commissioner Russell C. Weigel, III

VIA ELECTRONIC MAIL

June 14, 2023

Ms. Noemi Pasillas  
234 1<sup>st</sup> Street  
San Francisco, California 94105

Re: **SoFi Bank, National Association**

Dear Ms. Pasillas:

Reference is made to your recent letter requesting approval to register the above-referenced name with the Florida Secretary of State by SoFi Bank, National Association, which is a National Bank regulated by the Office of the Comptroller of the Currency and located in Cottonwood Heights, Utah.

Section 655.922, Florida Statutes, exempts a financial institution, holding company or its subsidiaries from the prohibition of using the word "bank," "banco," "banque," "banker," "banking," "trust company," "savings and loan association," "savings bank," or "credit union," or words of similar import, in any context or in any manner in its corporate name. Therefore, this Office will not object to the use of the above referenced name being registered to transact business in the state of Florida. However, this correspondence is not intended to grant the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Jeremy W. Smith  
Director  
Division of Financial Institutions  
Office of Financial Regulation

JWS:jjrj

cc: Lee Yarbrough, Chief, Bureau of Commercial Recordings, Division of Corporations,  
Department of State