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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: FIS Management Services, LLC		
	nited Liability Company)	•
The enclosed "Application by Foreign Limited Li Florida," Certificate of Existence, and check are s liability company to transact business in Florida		
Please return all correspondence concerning this r	natter to the following:	
Marjorie Nemzura		
(Na	ame of Person)	,
Fidelity National		
(Fi	rm/Company)	
171 N. Clark Street - 8th Floor		,
	(Address)	
Chicago, IL 60601		<u> </u>
(City/S	tate and Zip Code)	
For further information concerning this matter, plants	ease call:	
Marjorie Nemzura	at (312) 223-4552	~~ <u></u> ~
(Name of Person)	(Area Code & Daytime Telephone	Namber)
STREET ADDRESS:	MAILING ADDRESS:	JAN 31 CRETARY
Registration Section	Registration Section	SS 31 SS
Division of Corporations	Division of Corporations	P. P.
409 E. Gaines Street	P.O. Box 6327	•1
Tallahassee, Florida 32399	Tallahassee, Florida 32314	I: 38 STATE LORIDA
Enclosed is a check for the following amount:	•	<u>γ</u> α
\$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate o		ng Fee, Certificate Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	FIS Management Services, LLC	
•	(Name of Foreign Limited Liability Company)	.#LT
۷.	Delaware 3. 43-2054614	·
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	-
4.	6/24/2004 5. Perpetual	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
5.	upon filing	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	~ - 3
7.	601 Riverside Avenue.	
	Jacksonville FL 32204	
	(Street Address of Principal Office)	
3.	. If limited liability company is a manager-managed company, check here	
Э.	. The name and usual business addresses of the managing members or managers are as follows:	
	LSi Title Company	
	601 Riverside Avenue	•
	Jacksonville FL 32204	
ho ra	0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language at anslation of the certificate under oath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: payroll services	
	Mayou Nemerica 38	:
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S. the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	. *
	Marjorie Nemzura	
	Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:
FI	S Management Services, LLC
2.	The name and the Florida street address of the registered agent and office are:
	C T Corporation System
	(Name)
	1200 South Pine Island Road
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Plantation FL 33324 FL
	City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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PAGE 1

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIS MANAGEMENT SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JANUARY, A.D. 2005.



Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 3640088

DATE: 01-25-05

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