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(((H10000062113 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC. PLAN (USA)

Control of the Contro

Account Number: 120100000017

Phone : (302)428-1200

Fax Number : (302)428-1274

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Foreign Limited Liability Company **EPAYDAY LLC** 

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### COVER LETTER

SUBJECT:	EPAYDAY LLC		
	Name of Limited Liability Company		
The enclosed "A Existence, and co	pplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," heck are submitted to register the above referenced foreign limited liability company to transact busing	Certifi ess in F	cate o Horida
Please return all	correspondence concerning this matter to the following:		
	Caroline Quigley		
	Name of Person		
	Inc. Plan (USA)		
	Firm/Company		
	20C Trolley Square		
	Address		
	Wilmington, DE 19806	5 H	hi zadaya .
	City/State and Zip Code	HAR I	CA-menu ha
	cquigley@ incplan.net		T
	E-mail address: (to be used for future annual report notification)	Ξ	C
For further inform	mation concerning this matter, please call:	7:12	
V	Caroline Quigley at ( 302 ) 428-1200	,,,	
	Name of Person Area Code & Daytime Telephone Number		
Divisior Registra P.O. Bo	NG ADDRESS:  of Corporations  tion Section  x 6327  Seee, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301		
Enclosed is a c	check for the following amount:		
\$125.	00 Filing Fee  \$\overline{\subset}\$\$\$ \$\overline{\subset}\$\$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$\$ \$		

#### (((H10000062113 3)))

## 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.		EPAYDAY LL	_C	
**	(Name of Foreign Limited Liability Compa	ny; must include "Limi	ited Liability Company,	""L.L.C.," or "LLC.")
consen	ne unavailable, enter alternate name adopted tof the managers or managing members adony," "L.L.C," "LLC.")			
2. (Juri	Delaware sdiction under the law of which foreign lim pany is organized)	ited liability 3.	( FEI number, i	f applicable)
4	03/08/2010 (Date of Organization)	5	perpo	etual ility company will cease to
_	(Date of Organization)	exist	or "perpetual")	F.C. 7
6	(Date first transacted F (See sections 608.50) &	ousiness in Florida, if p 2 608.502 F.S. to deter	rior to registration.) mine penalty liability)	API AR
7. <u>19</u>	C Trolley Square			SS 22 00 1
W	ilmington, DE 19806			
8. If l	(Si imited liability company is a manage	treet Address of Princip er-managed compan	<u> </u>	TATE ORIDA
9. The	e name and usual business addresses	of the managing m	embers or managers	s are as follows:
Ne	eil Mcpherson			
19	C Trolley Square			
<u>w</u>	ilmington, DE 19806			
he juris	ached is an original certificate of existence, no r diction under the law of which it is organized. on of the certificate under oath of the translator	(A photocopy is not acc		
11. Ni	ature of business or purposes to be co	onducted or promot	ed in Florida:	Employment and
		payroll services		<u> </u>
	Car	ocu Chy	_	
	Signature of a memb (In accordance with section an affirmation under the pe	608.408(3), F.S., the exe	cution of this document co	onstitutes
		Caroline Quigl		
	• •	d or printed name of (H10000062113)	•	

# 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:	
EPAYDAY LLC	
If unavailable, the alternate to be used in the state of Florida is:	
	मिल ह
2. The name and the Florida street address of the registered agent and office are:	HAR 18
Marc H. Launer	
(Name)	M 7: 12 FOF STATE
333 Las Olas Way, Suite 2902	NATE TO
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Ft. Lauderdale FL 33301	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above statiliability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida Stati	nt as registered I statutes accept the
Marc H. Laurel (Signature)	
(Signature)	
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

(((H10000062113 3)))

INC.PLAN(USA)

(((H10000062113 3)))

# Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "EPAYDAY 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 EIGHTH DAY OF MARCH, A.D. 2010.

**4**796860 8300

100256371

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7855247

DATE: 03-08-10