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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INC. PLAN (USA)
Account Number : I20100000017
Phone : (302)428-1200
Fax Number : (302)428-1274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Cquig ley @incplan. net

Foreign Limited Liability Company

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Certificate of Status 1

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EXAMINER

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(((H10000062188 3))) COVER LETTER

SUBJECT: PAYAY LL	С
. Name of Limited Liabi	
The enclosed "Application by Foreign Limited Liability Company for Existence, and check are submitted to register the above referenced for	Authorization to Transact Business in Florida," Certificate of eign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following	;
Caroline Qu	igley
Name of Per	
Inc. Plan (L	······································
Firm/Compa	ny .
20C Trolley S	quare
Address	
Wilmington, DE	
City/State and Zi	S Code
cquigley@ incp E-mail address: (to be used for future	lan.net
For further information concerning this matter, please call:	annual report notrication)
Caroline Quigley at (302
Name of Person Area Code & I	aytime Telephone Number
MAILING ADDRESS:STREET ADDRDivision of CorporationsDivision of CorpoRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive CTallahassee, FL 32314Tallahassee, FL 32314	enter Circle
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & }\sum \text{\$155} \text{Certificate of Status}	00 Filing Fee & \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy

(((H10000062188 3)))

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: PAYAWAY LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 03/05/2010 perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 19C Trolley Square Wilmington, DE 19806 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Neil Mcpherson 19C Trolley Square Wilmington, DE 19806 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: **Employment and** 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.) Caroline Quigley

Typed or printed name of signee (((H10000062188 3)))

INC. PLAN (USA) (((H10000062188 3)))

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:	
PAYAWAY LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Marc H. Launer	
(Name)	
333 Las Olas Way, Suite 2902	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Ft. Lauderdale FL 33301	
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.	
Marc H, Lamus (Signature)	
\$ 100.00 Filing Fee for Application	

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

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\$ 25.00

5.00

\$ 30.00



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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAYAWAY 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 NINTH DAY OF MARCH, A.D. 2010.

4796286 8300

100258383

Jeffrey W. Bullock, Secretary of Stat AUTHENTYCATION: 7858730

DATE: 03-09-10

(((H10000062188 3)))