## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

F'rom:

Account Name

; C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

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

| Email | Address: |  |  |
|-------|----------|--|--|
|       |          |  |  |

#### Foreign Limited Liability Company Western Union Business Solutions (USA), LLC

| Certificate of Status | 1        |
|-----------------------|----------|
| Certified Copy        | 1        |
| Page Count            | 95 08    |
| Estimated Charge      | \$160.00 |

Electronic Filing Menu

Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

1/4/2013

CT CORPORATION

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| •                             |   | CO   | ERLETTER   |   | •  |
|-------------------------------|---|--|--|---|--|
| TO: Reg<br>Div                | sistration Section<br>Valon of Corporations     |  |  |   |  |
| CYUD IRCYP.                   |   | N BUSINESS SOLUTIO   | NS (USA), LLC  | •   |  |
| SUBJECT:                      |   | Name of Lin  | nited Liability Company                                      |   |  |
| The enclosed<br>Existence, ar | d "Application by For<br>ad check are submitted | sign Limited Liability Con<br>d to register the above refe | npany for Authorization to Trenced foreign limited liability | ransect Business in Florida,<br>Ity company to transact busin | Certificate of ness in Florida   |
| Please return                 | all correspondence c                            | oncorning this matter to th                                | s following:   |   |  |
|                               |   |  |  |   |  |
|                               |   | N  | ame of Person  | **************************************                        |  |
|                               |   |  | ٠.   |   | •  |
| •                             |   | F  | irm/Company  |   | T 25. 28   |
|                               |   | •  | ,,_,   | r<br>r  | SECOND IN THE SE |
|                               |   |  |  |   |  |
|                               |   |  | Address  | ల<br>ల  | 操士产  |
|                               |   |  |  | ·   |  |
| •                             |   | City/8   | tate and Zip Code  |   |  |
|                               |   |  |  | Ê   | <b>5</b>   |
| •                             | *** ****  | E-mail address: (to be used                                | for future annual report not                                 | ification)  | •  |
| For further in                | formation concerning                            | this matter, please call:                                  |  |   | •  |
|                               |   | •  |  |   |  |
|                               | Name o  | f Person Area  | at ()<br>Lode & Daytime Telephon                             | e Number  |  |
| Ма                            | ILING ADDRESS:                                  | STRÉI  | T ADDRESS:   |   |  |
|                               | sion of Corporations                            |  | n of Corporations  | •   | •  |
|                               | stration Section                                |  | ation Section  | ,   |  |
|                               | Box 6327  |  | Building   |   |  |
| TRUIS                         | thussee, FL 32314                               |  | Recutive Center Circle<br>ssee, FL 32301                     |   | ,  |
| Enclosed is                   | a check for the fo                              | llowing amount:  |  |   |  |
|                               |   | □ \$130.00 Filing Fee &<br>Certificate of Status           | □ \$155.00 Filing Fee &<br>Certified Copy                    | ■ \$160.00 Filing Fee, Ce<br>of Status, & Certified C         |  |

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO

|     | inality of the state of the sta |   | _  |                             |                  |
|-----|--|---|--|-----------------------------|------------------|
| ĽΝ  | COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, '<br>ITTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE ST   | THE FOLLOWING IS<br>TATE OF FLORIDA:                  | SUBMITTED TO REC                                     | ESTER A I                   | POREIGI          |
| 1.  | WESTERN UNION BUSINESS SOLUTIONS (USA), LLC  |   |  |                             |                  |
| ••• | (Name of Foreign Limited Liability Company; must include "   | Limited Liability Com                                 | pany," "L.L.C.," or "I                               | LC.")                       |                  |
|     |  |   |  |                             | _                |
| con | name unavailable, enter alternate name adopted for the purpose of sent of the managers or managing members adopting the alternate npany," "L.L.C." "LLC.")   | f transacting business in name. The alternate n       | n Florida and attach a<br>ame must include "Lis      | copy of the<br>nited Liabi  | written<br>Dity  |
| , [ | DELAWARE 31  | 13-3440076  |  |                             |                  |
| 7   | furisdiction under the law of which foreign limited liability ompany is organized)   | (FEI nom)   | oer, if applicable)                                  |                             | •                |
| A   | MARCH 17, 2013 5.  | PERPETUAL   |  |                             |                  |
| 4,  | (Date of Organization)   | (Duration: Year limite exist or "perpetual")          | d liability company w                                | ill cease to                | _                |
| e   | MARCH 17, 2013   |   |  |                             |                  |
| 6.  | (Date first transacted business in Florida<br>(See sections 608.501 & 608.502 F.S. to d  | , if prior to registration<br>letermine penalty liabl | i.)<br>lity)   |                             | 2013             |
| 7.  | 12500 EAST BELFORD AVENUE; M21A2   |   |  |                             | Ä.               |
|     | ENGLEWOOD CO 80112   | { · · · · ·   |  | N SS A                      | - <del>-</del> - |
|     | (Street Address of P   | rincipal Office)                                      |  | 식음                          | AH               |
| 8.  | If limited liability company is a manager-managed con  | npany, check here                                     | 3  | STAT                        | ထ္               |
| 9.  | The name and usual business addresses of the managin   |   |  |                             | 50               |
|     | RUESCH HOLDING, INC. [CONVERTED TO RUESCH H  | OLDING, LLC MARG                                      | CH 17, 2013]   |                             | _                |
|     | 12500 EAST BELFORD AVENUE; M21A2   |   | ·  |                             | _                |
|     | ENGLEWOOD CO 80112   |   |  | <del></del>                 | ,                |
| hej | Attached is an original certificate of existence, no more than 90 days unisdiction under the law of which it is organized. (A photocopy is lation of the certificate under oath of the translator must be submitted.   | not acceptable. If the co                             | by the official having<br>entificate is in a foreign | custody of a<br>language, a | records tr<br>a  |
|     | Nature of business or purposes to be conducted or pro  |   | MONEY TRANSMI  | TTER                        | _                |
| -   | Durtin & Braun   | m   |  |                             | <u>.</u> .       |

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. I am aware that any 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.)

KRISTIN BROWN, ASSISTANT SECRETARY OF SOLE MEMBER

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.

| The name of the Limited Liability Company is:  WESTERN UNION BUSINESS SOLUTIONS (USA), LLC |  |   |                                   |     |
|--|--|---|-----------------------------------|-----|
| If unavail   | lable, the alternate to be used  | in the state of Florida is:                   |                                   |     |
| 2. The na  |  | dress of the registered agent and office are: | 201<br>TAL                        |     |
|  | C T CORPORATION S  | (Name)  | 2013 JAN<br>- \$egrep<br>fall aha |     |
|  | 1200 South Pine Island   | , ,   | MARY<br>MASSA                     | 7   |
|  | Florida Str  | eet Address (P.O. Box NOT ACCEPTABLE)         |                                   | П   |
|  | Plantation   | FL 33324                                      | IM 8: 50 FISTATE FISTATE FISTATOA | (_) |
|  | et and the same of | 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.

James D. Martin Asst. Vice Presiden

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

# Delaware

DACE: 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND
CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE
CORPORATION UNDER THE NAME OF "TRAVELEX GLOBAL BUSINESS
PAYMENTS, INC." TO A DELAWARE LIMITED LIABILITY COMPANY,
CHANGING ITS NAME FROM "TRAVELEX GLOBAL BUSINESS PAYMENTS, INC."
TO "WESTERN UNION BUSINESS SOLUTIONS (USA), LLC", FILED IN THIS
OFFICE ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2012, AT 1:55
..O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE SEVENTEENTH DAY OF MARCH, ATD: 2019.

2013 JAN -4 AM 8: 50
SECRETARY OF STATE
TAUTAHASSEE, FLORIDA

3134298 8100V

121351270

You may verify this certificate enline at corp. delaware. gov/authver. shtml

AUTHENTY CATION: 0079906

DATE: 12-18-12

01/04/5013 14:33 8626336035

State of Delaware Secretary of State Division of Corporations Delivered 01:55 PM 12/17/2012 FILED 01:55 PM 12/17/2012 SRV 121351270 - 3134298 FTLE

### STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A CORPORATION TO A LIMITED LIABILITY COMPANY PURSUANT TO SECTION 18-214 OF THE LIMITED LIABILITY ACT

- 1. The name of the corporation immediately prior to filing this certificate is Travelex Global Business Payments, Inc.
- 2. The date the corporation was first formed is December 1, 1999.
- 3. The jurisdiction where the corporation was first formed is Delaware.
- 4. The jurisdiction immediately prior to filing this Cartificate is Delaware.
- 5. The name of the limited liability company to be set forth in the Certificate of Formation is Western Union Business Solutions (USA), LLC.
- This Conversion has been unanimously approved by the Board of Directors and sole shareholder
  of the corporation, in accordance with Section 266 of the General Corporation Law of the State of
  Delaware.
- This Certificate shall be effective upon the ninetieth (90th) day following its filing with the Secretary of State of the State of Delaware, i.e. March 17, 2013.

In witness whereof, the undersigned acknowledges and executes this Certificate of Conversion this 17th day of December, 2012.

Kristin Brown

Assistant Secretary

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PAGE 2

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND
CORRECT COPY OF CERTIFICATE OF FORMATION OF "WESTERN UNION
BUSINESS SOLUTIONS (USA), LLC" FILED IN THIS OFFICE ON THE
SEVENTEENTH DAY OF DECEMBER, A.D. 2012, AT 1:55 O'CLOCK P.M.

AND I DO BEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF FORMATION IS THE SEVENTEENTH DAY OF MARCH, A.D. 2013.

2013 JAN -1, AM 8: 50
SECRETARY DESTARE
TANTA AHASSEE FLORIDA

3134298 8100V

121351270

You may verify this certificate online at corp. delaware.gov/authrer.whtml

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 0079911

DATE: 12-18-12

01/04/2013 14:33 8666336092

State of Delawire Secretary of State Division of Corporations Delivered 01:55 PM 12/17/2012 FTLED 01:55 PM 12/17/2012 SRV 121351270 - 3134298 FILE

#### STATE OF DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE OF FORMATION

- 1. The name of the limited liability company is Western Union Business Solutions (USA), LLC.
- The address of its registered agent in the State of Delaware is 1209 Orange Street, Wilmington, Delaware 19801. The name of its registered agent at such address is The Corporation Trust Company.
- This Certificate shall be effective upon the ninetieth (90th) day following its filing with the Secretary of State of the State of Delaware, i.e. March 17, 2013.

In witness whereof, the undersigned acknowledges and executes this Certificate of Formation this 17th day of December, 2012.

Kristin Brown

Assistant Secretary

2013 JAN -4 AM 8: 50

01/04/5013 14:33 8626336035

## Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRAVELEX GLOBAL BUSINESS PAYMENTS, INC." 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 EIGHTEENTH DAY OF DECEMBER, A.D. 2012.

SEURCTARY OF STATE FACUATION AND SECRETARY OF STATE

3134298 8300

121351270

You may varify this cartificate online at corp.dalaware.gov/authvor.shtml

AUTHENTY CATION: 0079930

DATE: 12-18-12

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