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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section

Division of Corporations

Support. PayHawk, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SCOTT I. MERLIN, ESQ.

Cohen Pollock Merlin & Small, P.C.

Firm/Company

3350 Riverwood Parkway, Suite 1600

Address

Atlanta, GA 30339

City/State and Zip Code

mms@cpmas.com

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

For further information concerning this matter, please call:

Scott I. Merlin, Esq.

...770

857-4795

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

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

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$130.00 Filing Fee & Certificate of Status

☐ \$155.00 Filing Fee & Certified Copy

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

FOREIGN LIMITED LIABILITY COMPANY : 1 PayHawk, LLC	O TRANSACT BUSINESS IN THE STATE OF FLORIDA:
	npany; must include "Limited Liability Company," "L.L.C.," or "LLC")
(If name unavailable, enter alternate name adopted fo Liability Company," "L.L.C," or "LLC.")	the purpose of transacting business in Florida. The alternate name must include "Limited
, Georgia	_{3.} 47-3746632
(Jurisdiction under the law of which foreign limite company is organized)	liability (FEI number, if applicable)
upon qualification	
(Date first trans (See sections 605.	acted business in Florida, if prior to registration.) 904 & 605.0905, F.S. to determine penalty liability)
5. 85 A Mill Street, Bui	ding 214
Roswell, GA 30075	
_{6.} 85 A Mill Street, Buil	(Street Address of Principal Office)
Roswell, GA 30075	(Mailing Address)
7. The name, title or canacity and addr	ess of the person(s) who has/have authority to manage is/are:
	er / Kevin Nolan, Member
· · · · · · · · · · · · · · · · · · ·	
Fritz Owens, Member	/ Blake Malone, Member
85 A Mill Street, Build	ing 214, Roswell, GA 3075
having custody of records in the jurisdic	existence, no more than 90 days old, duly authenticated by the official tion under the law of which it is organized. (A photocopy is not an language, a translation of the certificate under oath of the translator
<u></u>	AAR AR T
(In accordance with section 605.0203, F.S., the execution of	ignature of an authorized person this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true to the Department of State constitutes a third degree felony as provided for Inc. 817. 1455. F.S.)
Harold Ba	aron, Member
Ty	ned or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Co. WK, LLC	шрану із.		
If unavailable	e, the alternate to be used in	the state of Florida is:		
2. The name	and the Florida street addre	ss of the registered agent and office are:		
	National Corpo	orate Research, LTD.,INC.		
		(Name)		
	155 Office Plaza Drive			
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee	FL 32301		
		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 605, 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)

(Assistant Secretary)

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED : April 17, 2015 JURISDICTION PRINT DATE

: 15039068 : Georgia : April 20, 2015

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

> PayHawk, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp

Secretary of State

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