MIL000003740

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special lastwestians to Filipp Officer
Special Instructions to Filing Officer:
- 10071
W15-68871 RA

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10/15/15--01027--011 **125.00

05/11/16--01005--006 **138.75

11/09/15--01003--004 **777.50



MAY 11 2016 J SHIVERS



RECEIVED

15 NOV -6 PH12: 41

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 16, 2015

TROY R WILKERSON 1688 MERIDIAN AVE, STE. 902 MIAMI BEACH, FL 33139

SUBJECT: MERCHANT DATA SYSTEMS NA LLC

Ref. Number: W15000068871

We have received your document for MERCHANT DATA SYSTEMS NA LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$777.50.

There is a balance due of \$777.50.

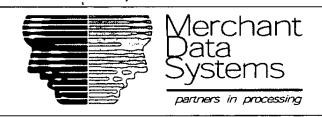
Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 815A00021966



Merchant Data Systems, Inc. 1688 Meridian Ave., Suite 902 Miami Beach, FL 33139 (305) 538-5050 (800) 249-6377 fax: (305) 538-2659 www.merchantdatasystems.com

April 28, 2016

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern,

Please allow this correspondence to serve as written consent of Merchant Data Systems, Inc. to allow the use of the name Merchant Data Systems in connection with registration of Merchant Data Systems, LLC with the Florida Department of State, Division of Corporations.

Sincerely,

Spero Lyons
Chief Operating Officer
Merchant Data Systems
Company.com
1688 Meridian Avenue
9th Floor
Miami Beach, FL 33139
Phone - 305-538-5050 Ext 207
Fax 305-538-2659
Toll Free 800-249-6377 Ext 207
spero.lyons@company-corp.com
www.company.com



COVER LETTER

****,;

TO:

Registration Section Division of Corporations

SUBJECT:	Merchant Data Sys			
			Limited Liability Company	
The enclosed Existence, an	l "Application by Fo nd check are submitte	reign Limited Liability Comped to register the above refer	pany for Authorization to Tenced foreign limited liabili	ransact Business in Florida," Certificate of ty company to transact business in Florida.
Please return	all correspondence	concerning this matter to the	following:	
	Troy R. Wilke	rson		
		N	ame of Person	· · · · · · · · · · · · · · · · · · ·
	Merchant Data	Systems LLC		
		F	irm/Company	-
	1688 Meridian	Ave, Suite 902		
			Address	A A A A A A A A A A A A A A A A A A A
	Miami Beach,	FL 33139		
		City/S	tate and Zip Code	
	billing@compan	•		
		E-mail address: (to be used	d for future annual report no	otification)
For further in	nformation concerning	g this matter, please call:		
Troy Wilkerson		305 538-50	050	
	Name o	of Contact Person	\ 	ytime Telephone Number
Divi Reg — P.O.	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registra Clifton l 2661 Ex	T ADDRESS: of Corporations tion Section Building ecutive Center Circle usee, FL 32301
	check for the follow 125.00 Filing Fee	ing 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 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	ms, LLC						
(Name of Fore	eign Limited Liability Company; must	includ	e "Limited Liabi	lity Company," "L.L.	C.," or "LI	.C.")	
(If name unavailable, enter al Liability Company," "L.L.C,	Iternate name adopted for the purpose (" or "LLC.")	of tran	sacting business	in Florida. The altern	ate name m	nust incl	ude "Limited
_{2.} Nevada		3.	65-0761986				
(Jurisdiction under the law of which foreign limited liability company is organized) 04/01/2013 (FEI number, if applical					licable)		
. 1688 Meridian Ave,	(Date first transacted business (See sections 605,0904 & 605,0905) Suite 902	in Flo 905, F	nida, if prior to r .S. to determine p	egistration.) cenalty liability)	·		
Miami Beach, FL 33	139						
1688 Meridian Ave, \$	(Street Address of Pr Suite 902	incipal	Office)		20	16 MA	
Miami Beach, FL 33	139				· 美洲	- AV	· · · · · · · · · · · · · · · · · · ·
	(Mailing Ac	ddress)			412	S	i da
7. Name and street addres	ss of Florida registered agent: (P.C	. Box	NOT acceptal	ole)	(** <u>6.3</u> -n **		in to take
Name:	CT Corporation System					7:5	To the second
Office Address:	1200 South Pine Island Road			,		9	
	Plantation			, Florida 33324			
Registered agent's accep	(City)			(Zip co	de)		
Having been named as re lesignated in this applica o complywith the provision	gistered agent and to accept service tion, I hereby accept the appoint ons of all statutes relative to the party position as registered agent.	ient a roper	s registered ago and complete p	ent and agree to ac	t in this co duties, ar	apacity id I am	. I further ag
	acity and address of the person(s) w						
			each, FL 331:	39			
	8 Meridian Ave, Suite 902, Mia	ımı B					
Spero Lyons, COO, 168	8 Meridian Ave, Suite 902, Mia 1688 Meridian Ave, Suite 902, I		i Beach,FL 3				

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Troy R. Wilkerson

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MERCHANT DATA SYSTEMS**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 28, 1997, and is in good standing in this state.

O TOTAL OF THE O

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 4, 2016.

Ballons K. Cegarske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160504-1986
You may verify this electronic certificate
online at http://www.nvsos.gov/