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(Requestor's Name)
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PICK-UP WAIT MAIL
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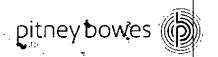
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DIVICIO LI COSPONIZIONE

JUL 02 2019

D CUSHING



June 17, 2019

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re:

- (1) Pitney Bowes Presort Services, Inc Application by Foreign Corporation for Withdrawal \$35
- (2) Pitney Bowes Presort Services, LLC Application by Foreign Limited Liability Company To Transact Business \$125

Dear Registration Section:

Please find enclosed an application for withdrawal and an application for registration of a foreign entity, along with a certificate of existence and and check in the amount of \$160 payable to Florida Department of State.

Please do not hesitate to contact me if you require additional information.

Thank you

Sincerely,

Landa Turner

DIVISION C. 20 NEATHER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:		Pitney Bowes Pi	resort Services, LI	.c			
2 (1 2 3 1 7 7 7 7 7		Name of	Limited Liability	Company	_		
				ation to Transact Business in Florida. ited liability company to transact bus			
Please return	all correspondence co	oncerning this matter to the	following:				
			Linda Turner				
		N	lame of Person		_		
	Pitney Bowes Inc.						
	Firm/Company						
27 Waterview Drive							
Address							
	Shelton, CT 06484						
	City/State and Zip Code						
	•	E-mail address: (to be use	d for future annua	I report notification)	_	_	
For further in	nformation concerning	this matter, please call:		•	ಡ	37.410 35.	
L. T	`urner		203 at (351-7385		CRETE	
	Name of	Contact Person	Area Code	Daytime Telephone Number	<u> </u>		
Divi Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	PH 3: 51	OF STATE	
	losed is a check for thise make check payabl	e following amount: le to: FLORIDA DEPAR'	FMENT OF STA	TE			
	\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Sta	& 🔲 \$155.00	Filing Fee & S160.00 Filing fied Copy of Status & Ce	•		

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

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

(Name of Foreign	Limited Liability Company, must include	Limited Liability	Company," "L.L.C.," or "ELC.")	
name unavailable, enter alternate n	ame adopted for the purpose of transacting business	ss in Florida. The alte	mate name must include "Limited Liability Compa	ny," "L.L.C," or "LL.C.")
Delaware		_	117-179	11715
(Jurisdiction under the law of w	hich foreign limited liability company is organized	3	47 - 079 (FEI number, if applica	ble)
	(Date first (managed huminess in Storida if	arian to majetantian \		
	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to	determine penalty lia	ability)	
101101 Street		6.	27 Waterview Drive	
(Street Address of)	rincipat Office)	0	(Mailing Address)	·····
Omaha, Nebraska 6812		S	Shelton, CT 06484	
		-	<u>. </u>	<u></u>
				등 원인
		-		
Name and street address	s of Florida registered agent: (P.O	. Box <u>NOT</u> ac	cceptable)	
Name:	CT Corporation System			
rame.			·······	on E
Office Address:	1200 South Pine Island Road			
	Plantation, FL		33324	~
			, Florida	
	(City)		· (Zip code)	
egistered agent's accep		a of process (or the above stated limited liability	component the pla
signated in this applica	tion, I hereby accept the appointm	ent as register	ed agent and agree to act in this ca	pacity. I further a
	ions of all statutes relative to the pi s of my position as registered agen		plete performance of my duties, ar	id I am familiar wi
prime vongation.	, o,, position as registered agen		. Souza	
		Assistant	Secretary	

(Registered agent's signature)

Name: Pitney Bowes Inc. 3001 Summer Street Stamford, CT 06926	Member	Address:	
	Authorized		
Stamford, CT 06926	_		
	-		
	Person		···································
Other_	Other		Other
Name:	Manager	Name:	
Address:	Member	Address:	
 .	Authorized		
	Person		
Other	Other		Other
Same:	Manager	Name:	
Address:	Member	Address:	
	Authorized		
<u> </u>	Person		
Other	Other		Other
	Other	Address: Member Authorized Person Other Manager Member Authorized Authorized Person Authorized Person Authorized Person	Member Address:

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PITNEY BOWES PRESORT SERVICES, 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 TENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202993407

Date: 06-10-19

2530710 8300 SR# 20195344019