## State of North Carolina Department of the Secretary of State

SOSID: 1628322 Date Filed: 10/3/2017 11:48:00 AM Elaine F. Marshall North Carolina Secretary of State

C2017 272 00181

## APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to §55-15-03 of the General Statutes of North Carolina, the undersigned corporation hereby applies for a Certificate of Authority to transact business in the State of North Carolina, and for that purpose submits the following:

1.	The name of the corporation is Invoice Cloud, Inc.			
	and if the corporate name is unavailable for use in the State of North Carolina, the name the corporation wishes to use is:			
2.	The state or country under whose laws the corporation was organized is:  Delaware			
3.	The date of incorporation was $9/20/17$			
	Its period of duration is: perpetual or a date certain (mm/dd/yyyy)			
5.	Principal office information: (Select either a or b.)			
	a. The corporation has a principal office.			
	The street address and county of the principal office of the corporation is:			
	Number and Street 30 Braintree Hill Office Park, Suite 303			
	City, State, Zip Code Braintree MA 02184 County			
	The mailing address, if different from the street address, of the principal office of the corporation is:			
	Number and Street			
	City, State, Zip Code County Norfolk			
	b. The corporation does not have a principal office.			
6.	The street address and county of the registered office in the State of North Carolina is:			
	Number and Street 160 Mine Lake Ct., Ste 200			
	City: Raleigh State NC, Zip Code 27615-6417 County: Wake			
7.	The mailing address, if different from the street address, of the registered office in the State of North Carolina is:			
	Number and Street			
	City: State <u>NC</u> , Zip Code: County:			
8.	The name of the registered agent in the State of North Carolina is:			

<ol> <li>The names, titles, and usual busine Name</li> </ol>	ess addresses of the current office <u>Title</u>	ers of the corporation are (attach if necessary):  **Business Address**
Robert Bennett	CEO	30 Braintree Hill Office Park, Braintree MA 02184  2883 Macao Drive, Herndon, VA 20171
Nelson Blitz	Secretary	
	rds in the state or country of inco	port) duly authenticated by the Secretary of State or other official orporation. The Certificate of Existence must be an
11. If the corporation is required to u of directors, certified by its secre		ransact business in this State, a copy of the resolution of its board e is attached.
12. This application will be effective	upon filing, unless a delayed da	te and/or time is specified:
This is the 28day o	f September , 20 2017	_·
		Invoice Cloud, Inc.
		NAME OF CORPORATION Signature
		Nelson Blitz, Secretary
		Type or Print Name and Title

## NOTES:

1. Filing fee is \$250. This document must be filed with the Secretary of State.



The First State

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

DELAWARE, DO HEREBY CERTIFY "INVOICE CLOUD, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF SEPTEMBER, A.D.

2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

Authentication: 203255174

Date: 09-20-17