

6/9/2021

Division of Corporations

**FO8000004488**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000228871 3)))



H210002288713ABC+

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6380

From:  
Account Name : C T CORPORATION SYSTEM  
Account Number : FC4000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

Please keep original  
file date of 6/9/2021.

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

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BBVA TRANSFER SERVICES, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

JUN 15 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F08000004488

(Document number of corporation (if known))

1. BBVA Transfer Services, Inc.  
(Name of corporation as it appears on the records of the Department of State)
2. California 3. 10/15/2008  
(Incorporated under laws of) (Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 06/01/2021
5. PNC Global Transfers, Inc.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

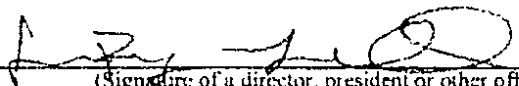
\_\_\_\_\_  
Signature of New Registered Agent, if changing

FILED  
2021 JUN -9 AM 8:32  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

  
 \_\_\_\_\_  
 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Jason Lundell

(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILING FEE \$35.00

FILED  
 2021 JUN -9 AM 8:32  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



## Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

**Entity Name:** PNC GLOBAL TRANSFERS, INC.  
**File Number:** C1858919  
**Registration Date:** 05/27/1993  
**Entity Type:** DOMESTIC STOCK CORPORATION  
**Jurisdiction:** CALIFORNIA  
**Status:** ACTIVE (GOOD STANDING)

As of June 8, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of California  
this day of June 9, 2021.

A handwritten signature in black ink, appearing to read "Shirley N. Weber".


**SHIRLEY N. WEBER, Ph.D.**  
**Secretary of State**

**Certificate Verification Number:** REQKK2R

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at [bizfile.sos.ca.gov/certification/index](http://bizfile.sos.ca.gov/certification/index).

Certified Copy

I hereby certify that the following transcript of 1 page(s) is a full, true, and correct copy of the original record in the custody of the California Secretary of State's office.06/08/2021  
Certification DateSHIRLEY M. WEBER, Ph.D.  
Secretary of State

 <b>Secretary of State</b> <b>Certificate of Amendment</b> <b>of Articles of Incorporation</b> <b>Name Change Only - Stock</b>		<b>AMDT-STK-NA</b>
<b>IMPORTANT - Read Instructions before completing this form.</b> <b>Filing Fee - \$30.00</b> <b>Copy Fees - First Page \$1.00 &amp; .50 for each attachment page;</b> <b>Certification Fee - \$5.00</b>		
<b>1. Corporation Name</b> (Enter the exact name of the corporation as it currently is recorded with the California Secretary of State.) BBVA Transfer Services, Inc.		<b>2. 7-Digit Secretary of State Entity Number</b> <b>C1858919</b>
<b>3. New Corporation Name</b> Enter the number, letter or other designation assigned to the provision in the Articles of Incorporation being amended (e.g., "1.", "I", "First", or "One"). Article <u>One</u> of the Articles of Incorporation is amended to read: The name of the corporation is <u>PNC Global Transfers, Inc.</u>		
<b>4. Approval Statements</b> 4a. The Board of Directors has approved the amendment of the Articles of Incorporation. 4b. Shareholder approval was (check one): <input checked="" type="checkbox"/> By the required vote of shareholders in accordance with California Corporations Code section 902. The total number of outstanding shares of the corporation entitled to vote is <u>25,000</u> . The number of shares voting in favor of the amendment equaled or exceeded the vote required. The percentage vote required was more than 50%. OR <input type="checkbox"/> Not required because the corporation has no outstanding shares.		

Read, sign and date below (See instructions for signature requirements. Note: Both lines must be signed.)

We declare under penalty of perjury under the laws of the State of California that the matters set forth herein are true and correct of our own knowledge and we are authorized by California law to sign.

June 4, 2021  
Date

Jason Lundell  
Signature (Do not leave blank)

Jason Lundell  
Type or Print Name of Vice President

June 4, 2021  
Date

Carrie L. Cogburn  
Signature (Do not leave blank)

Carrie L. Cogburn  
Type or Print Name of Secretary

