

Filing Fee: \$50.00

ID Number: 162559



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

Office of the Secretary of State  
Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV.  
2015 NOV - 6 AM 10:39

**FICTITIOUS BUSINESS NAME STATEMENT**

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. The legal name of the applicant business corporation, limited liability company or limited partnership is: Nationwide Biweekly Administration, Inc.
2. The fictitious business name to be used is Standard Payment Processing
3. The state or territory under the laws of which it is incorporated, organized or formed is Ohio
4. The date of incorporation, organization or formation is June 10, 2002
5. If a business corporation, the address of its registered office within Rhode Island is 222 Jefferson Blvd. Suite 200, Warwick RI 02888
6. If a business corporation, the business in which it is engaged Provision of a biweekly interest savings program.
7. Applicant is otherwise authorized to do business in the state of Rhode Island.

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: \_\_\_\_\_

**Nationwide Biweekly Administration, Inc.**

Name of Applicant Corporation, Limited Liability Company or Limited Partnership

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By [Signature]  
Signature of Authorized Officer of the Corporation

By \_\_\_\_\_  
Signature of Authorized Person for the Limited Liability Company

By \_\_\_\_\_  
Signature of Authorized Person for the Limited Partnership



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

