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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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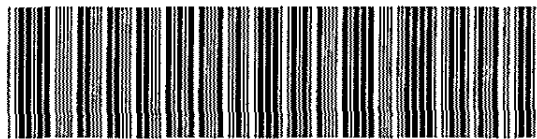
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BROWN FEB 15 2005

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Employee Leasing Services, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Gregory W. Bee  
(Name of Person)

Taft, Stettinius & Hollister LLP  
(Firm/Company)

425 Walnut St. Suite 1800  
(Address)

Cincinnati, OH 45202  
(City/State and Zip code)

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For further information concerning this matter, please call:

Gregory Bee at ( 513 ) 381-2838  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
 Registration Section  
 Division of Corporations  
 409 E. Gaines St.  
 Tallahassee, FL 32399

**MAILING ADDRESS:**  
 Registration Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Employee Leasing Services, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

ELS Human Resource Solutions, Inc.

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

2. Ohio 3. 31-1388918  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 6, 1999 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3235 Omni Dr. Cincinnati, OH 45245  
(Principal office address)

\_\_\_\_\_  
(Current mailing address)

8. Professional Employer Organization Services  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 S. Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Susan J. Metz  
Susan J. Metz  
Assistant Secretary  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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**A. DIRECTORS**

Chairman: Ronald Heineman  
Address: 3235 Omni Dr. Cincinnati, OH 45245

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: William Walton  
Address: 3235 Omni Dr. Cincinnati, OH 45245

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

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**B. OFFICERS**

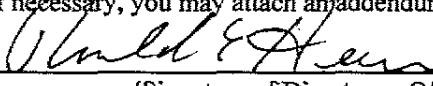
President: Ronald Heineman  
Address: see above

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: William Walton  
Address: see above

Treasurer: Ronald Heineman  
Address: see above

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. Ronald Heineman, President  
(Typed or printed name and capacity of person signing application)

**United States of America  
State of Ohio  
Office of the Secretary of State**

*I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show **EMPLOYEE LEASING SERVICES, INC.**, an Ohio corporation, Charter No. 854611, having its principal location in Cincinnati, County of Hamilton, was incorporated on October 05, 1993 and is currently in **GOOD STANDING** upon the records of this office.*

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*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 7th day of February, A.D. 2005*

*J. Kenneth Blackwell*

Ohio Secretary of State