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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2007 JAN 16 PH 3: 56

## **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: AXUET the SOLUTIONS, INC.  (Name of corporation - must include suffix)		
(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:		
MARYBETH HARVEY		
MARYBETH HARVEY (Name of Person)		
AXUET HR SOLUTIONS, INC  (Firm/Company)		
8345 LEHERA DRIVE SLUTE 100 (Address) (ENEXA, KANSAS 66214-1765 (City/State and Zip code)		
(Address)		
LENEXA, KAMSAS 66214-1765		
(City/State and Zip code)		
For further information concerning this matter, please call:		
MARYBETH HARVEY at (913) 754-5367  (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clother Center Circle Tallahassee, FL 32301  MAILING ADDRESS: New Filing Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\frac{1}{2}\$\$ \$78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy		



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 29, 2006

MARGARET HERVEY AXCET HR SOLUTIONS, INC. 8345 LENEXA DRIVE, SUITE 100 LENEXA, KS 66214-1765

SUBJECT: AXCET HR SOLUTIONS, INC.

Ref. Number: W06000055617

We have received your document for AXCET HR SOLUTIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$4,600.00.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Document Specialist

Letter Number: 706A00073095

# 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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") FOR MERLY MOWEST STAFF SOULTIONS, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. KANSAS 3. 48-1075588
(State or country under the law of which it is incorporated) (FEI number, if applicable) 4. SEFT. 28, 1989

(Date of incorporation)

5. PERFETUAL

(Duration: Year corp. will cease to exist or "perpetual") JAN. 1, 2002 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) LEMENA DRIVE SUITE 100 LEMENA KS 66214 (Principal office address) LENEXA DRIVE SUITE 100 LEMENA, ILS 66214 (Current mailing address) LEASING COMPANY (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) CORPOLATION SYSTEM Name: 1200 SOUTH FINE ISLAMA ROMO

PLANTATION , Florida 33324

(City) (Zip code) Office Address: 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. SEE ATTACHED

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
- Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: GERALD F. DIDDLE  Address: 10810 W. 140 TERRALE
OVERLAND PARK, KS 66221
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
1 0 000
NOTE: If necessary, you hav a particular to the application listing additional officers and/or directors.
13. Level Madde
(Signature of Director or Officer listed in number 12 of the application)
14 OP WALD E. 010 (We

(Typed or printed name and capacity of person signing application)

ACCEPTANCE OF APPOINTMENT

RE: Axcet HR Solutions, Inc.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

By\_

Dated: 12/12/2006

CT CORPORATION SYSTEM

Jonatkan L. Miles,

Assistant Secretary

### STATE OF KANSAS OFFICE OF SECRETARY OF STATE RON THORNBURGH

## To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that, according to the records of this office,

AXCET HR SOLUTIONS, INC.

KANSAS FOR PROFIT CORPORATION Business Entity ID Number: 1705573

was filed in this office on September 26, 1989 and has complied with the applicable provisions of the laws of the State of Kansas and on this date is in good standing and authorized to transact business or to conduct its affairs within this state.

Dated: 12/12/2006

#### For Validation:

Certificate ID: 56979

To validate this certificate, visit the following web site, enter this certificate ID, then follow the instructions displayed.

https://www.accesskansas.org/businessentity/validate.html

Signed:

RON THORNBURGH SECRETARY OF STATE

https://www.accomplemence.org/husinessontity/contificate.html?tid=ho