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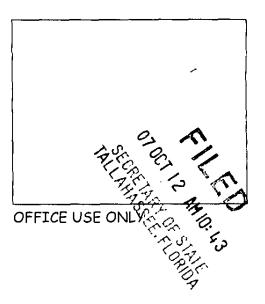
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DIVISION NESSEE FLORIDA

070CT 12 AM 10: 43: SECRETARY OF STATE: ALLAHASSEF, FI OBINA FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)656-6446



WALK-IN

ENTITY NAME:

1. SIGNATURE RECRUITMENT, LLC

CK# 2843

AMOUNT \$620.00 (\$155.00 FOR THIS FILING)

PLEASE FILE THE ATTACHED QUALFIFICATION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

___ STAMPED COPY

___ CERTIFICATE OF STATUS

COVER LETTER

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TO: Registration Section
Division of Corporations

SUBJECT: SIGNATURE PAYROLL SERVICES, LLC

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

VICTORIA LEE					
(Name of Person)					
FENIGSTEIN & KAUFMAN					
(Firm/Company)					
1900 AVENUE OF THE STARS, SUITE 2300					
(Address)					
LOS ANGELES, CA 90067					
(City/Sta	te and Zip Code)				
For further information concerning this matter, plea	ase call:				
VIOTORIA LEE	240 004 0777				
VICTORIA LEE	_at (310) 201-0777				
(Name of Person)	(Area Code & Daytime Telephone Number)				
MAILING ADDRESS:	STREET ADDRESS:				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: \$\sum_\$\\$125.00 \text{ Filing Fee} \sum_\$\\$130.00 \text{ Filing Fee & Certificate of \$\frac{1}{2}\$.	✓\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy				

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	SIGNATURE PAYROLL SERVICES, LLC				
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")				
co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written unavailable, enter alternate name or managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C.," "LLC.")				
٠.	DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)				
4.	JULY 23, 2007 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")				
6.	N/A Es S				
	(Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)				
7.	2979 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 完成 元				
	2979 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 (Street Address of Principal Office) If limited liability company is a manager-managed company, check here				
	(Street Address of Principal Office)				
8.	If limited liability company is a manager-managed company, check here				
9.	The name and usual business addresses of the managing members or managers are as follows:				
	LP MANAGER, LLC, 2979 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410				
	·				
th	D. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)				
1	Nature of business or purposes to be conducted or promoted in Florida:				
	TO PROVIDE EMPLOYEE LEASING AND PAYROLL RELATED SERVICES TO HEALTH CARE PROVIDERS AND RELATED BUSINESSES				

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SEE ATTACHED SIGNATURE PAGE

SIGNATURE PAGE TO APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA OF SIGNATURE PAYROLL SERVICES, LLC

SIGNATURE PAYROLL SERVICES, LLC,

a Delaware limited liability company

By: LP Manager, LLC, a Delaware limited

liability company, its Manager

By: LPMM, Inc., a Delaware corporation, its Manager

Ву: ____

Jacob Wintner, Secretary/Treasurer

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Comp	any is:		
SIGNATUR	E PAYROLL SERVI	CES, LLC		
If name unavails	able, the alternate name to b	e used in the sta	ate of Florida is:	
2. The name an	d the Florida street address	of the registered	l agent and office are:	
REGISTERED AGENT SOLUTIONS, INC.				
		(Name)		
155 OFFICE PLAZA DRIVE, SUITE A				
	Florida Street Add	ress (P.O. Box NO	OT ACCEPTABLE)	
	TALLAHASSEE	FL	32301	
		City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Ricardo Oroxdo, Secretare
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE :

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIGNATURE PAYROLL SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF SEPTEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIGNATURE PAYROLL SERVICES, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



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Varriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5984487

DATE: 09-07-07