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SECRETARY OF STATE SIVISION OF CORPORATIONS

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FILING COVER S ACCT. #FCA-14	SHEET	XN	ud foday	10 th State of the
CONTACT:	KATIE WO	NSCH	plas	My Constitution of the Con
DATE:	05/04/2010		9	106 A.
REF. #:	001495.12462			
CORP. NAME:	4 P'S PAYRO	OLL SERVICES, LLC		
() ARTICLES OF INCO	PRPORATION	() ARTICLES OF AMENDME	NT () ARTICLES O	F DISSOLUTION
() ANNUAL REPORT		() TRADEMARK/SERVICE M	IARK () FICTITIOUS	NAME
(XX) FOREIGN QUAL	IFICATION	() LIMITED PARTNERSHIP	() LIMITED LIA	BILITY
() REINSTATEMENT		() MERGER	() WITHDRAW	AL
() CERTIFICATE OF C	CANCELLATION			
() OTHER:				
STATE FEES P	REPAID WI	TH CHECK# <u>63097</u> FO	PR \$ <u>155.00</u>	
AUTHORIZATI	ON FOR A	CCOUNT IF TO BE DI	EBITED:	
		со	ST LIMIT: \$	
PLEASE RETUI	RN:			
(XX) CERTIFIED C	ОРҮ	() CERTIFICATE OF GOO	DD STANDING	() PLAIN STAMPED COPY
() CERTIFICATE O	F STATUS			

Examiner's Initials

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 ILABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	4 P's PAYROLL S (Name of Foreign Limited Liability Company; must includ	SERVICE, LLC
	(Name of Foreign Limited Liability Company; must includ	e "Limited Lifenity Company," "L.L.C." or "LLC.")
CO	If name unavailable, enter alternate name adopted for the purpose onsent of the managers or managing members adopting the altern company," "L.L.C," "LLC.")	of transacting business in Florida and attach a copy of the writte ate name. The alternate name must include "Limited Liability
2	Michigan 3.	56-2250406
	(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4.	01/09/2006 5.	perpetual
7.	(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	upon qualification	
	(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	da, if prior to registration.) o determine penalty liability)
7.	17550 W. Eleven Mile Rd., Suite A, Lanthrup Vi	illage, MI 48076
	/Cuas Address	Charles Office
	(Street Address of	Principal Office)
8.	. If limited liability company is a manager-managed c	ompany, check here
9.	. The name and usual business addresses of the manag	ging members or managers are as follows:
	Rainbow Early Education Holding LLC-M	lember
	17550 W. Eleven Mile Road, Suite A,	Lanthrup Village, MI 48076
the tran	O. Attached is an original certificate of existence, no more than 90 date jurisdiction under the law of which it is organized. (A photocopy anslation of the certificate under oath of the translator must be submit. Nature of business or purposes to be conducted or present and the certificate under oath of the translator must be submit.	tted.)
	provide payro	
	provide payro	
	705	
		norized representative of a member. In the execution of this document constitutes In that the facts stated herein are true)
	•	enton, CEO
	Typed or printed r	

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.

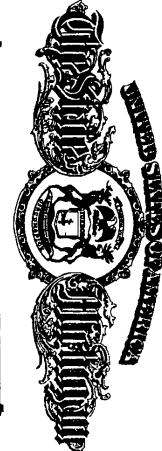
4 P's P		
	AYROLL SERVICES, LL	JC
If unavailable	, the alternate to be used	ed in the state of Florida is:
2. The name a	and the Florida street ad	ddress of the registered agent and office are:
	United Corporat	ce Services, Inc.
		(Name)
	9200 South Dadel	land Blvd, Suite 508
	Florida Str	reet Address (P.O. Box NOT ACCEPTABLE)
	Miami	FL 33156
		City/State/Zip
liability compa agent and agre relating to the obligations of	iny at the place designative to act in this capacity. Proper and complete per	nt and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as registere . If urther agree to comply with the provisions of all statutes informance of my duties, and I am familiar with and accept the dagent as provided for in Chapter 608, Florida Statutes.
liability comparagent and agree relating to the obligations of	any at the place designate to act in this capacity. Proper and complete per my position as registered (Signature) [Signature] [Signature]	ted in this certificate, I hereby accept the appointment as registere . If urther agree to comply with the provisions of all statutes informance of my duties, and I am familiar with and accept the dagent as provided for in Chapter 608, Florida Statutes.

\$ 5.00 Certificate of Status (optional)

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Lausing, Michigan

Bepartment of Energy, Labor & Economic Growth

This is to Certify That

4 P'S PAYROLL SERVICE, LLC

was validy organized on Januery 9, 2006 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1012703

In testimony whereof, I have hereunito set my hand, in the City of Lansing, this 23rd day of April, 2010

Machine Director

Bureau of Commercial Services