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**EXAMINER**



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12 APR - 4 PM 3:10  
41

# EASTMAN & SMITH LTD.

ATTORNEYS AT LAW

*Established 1844*

Gail L. Whaley, ACP  
Advanced Certified Paralegal  
Direct Dial: 419-247-1693  
glwhaley@eastmansmith.com

One SeaGate, 24<sup>th</sup> Floor  
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Toledo, Ohio 43699-0032  
Telephone: 419-241-6000  
Facsimile: 419-247-1777

April 3, 2012

Florida Department of State  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

*Via Federal Express*  
*Trk No. 798242447915*

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DIVISION OF CORPORATIONS  
12 APR -4 PM 3:00

Re: **Impact Employment Solutions of Florida, LLC**  
Our File No: C288/196403

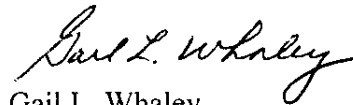
Dear Sir or Madam:

Please find enclosed an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for filing in your office on behalf of our client, Impact Employment Solutions of Florida, LLC, an Ohio limited liability company. Our firm's check in the amount of \$125.00 is enclosed, along with a Full Force and Effect Certificate issued by the Ohio Secretary of State.

Please return evidence of filing to my attention at the above address as set forth on the attached Cover Letter.

Thank you for your assistance.

Very truly yours,

  
Gail L. Whaley

GLW/  
Enclosures  
cc: Henry N. Heuerman, Esq. via email

**COVER LETTER**

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
12 APR -4 PM 3:41

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Impact Employment Solutions of Florida, 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:

Gail L. Whaley, ACP  
Name of Person

c/o Eastman & Smith Ltd.  
Firm/Company

One SeaGate, 24th Floor  
Address

Toledo, OH 43604  
City/State and Zip Code

ghaskins@impactemploymentsolutions.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gail L. Whaley, ACP at ( 419 ) 247-1693  
Name of Person Area Code & Daytime Telephone Number

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

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate 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. Impact Employment Solutions of Florida, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Ohio 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. March 8, 2012 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 136 N. Huron Street  
Toledo, OH 43604  
(Street Address of Principal Office)

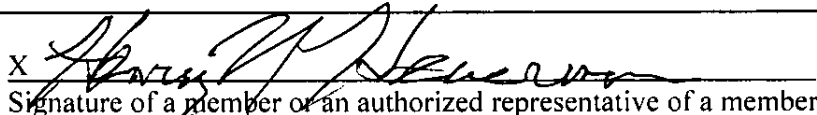
8. If limited liability company is a manager-managed company, check here

9. The name and usual business addresses of the managing members or managers are as follows:

Sole Member: Impact Employment Solutions, Inc. 136 N. Huron Street, Toledo, OH 43604

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Employment staffing and recruitment services

X   
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Henry N. Heuerman, Authorized Representative  
Typed or printed name of signee

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
APR - 4  
PM 3:41

**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 Company is:

Impact Employment Solutions of Florida, LLC

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If unavailable, the alternate to be used in the state of Florida is:

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2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

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(Name)

1200 South Pine Island Road

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Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Plantation

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FL 33324

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.*

C T Corporation System

By:



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(Signature)

Diane Stout, Asst. Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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

*I, Jon Husted, 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 business entities; that said records show IMPACT EMPLOYMENT SOLUTIONS OF FLORIDA, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2090084, was organized within the State of Ohio on March 08, 2012, is currently in FULL FORCE AND EFFECT upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 3rd day of April, A.D. 2012*

*Jon Husted*

Ohio Secretary of State