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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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### Foreign Limited Liability Company Human Capital Select LLC

Certificate of Status	1
Certified Copy	0
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Help

B. BOSTICK

 $M\Delta Y = 7 2014$ 

5/6/2014

**EXAMINER** 

	COVER LETTER	
TO: Registration Section Division of Corporation	ous .	
SUBJECT: HUMAN CAPITA	L SELECT LLC	
<del></del>	Name of Limited Liability Company	-
The enclosed "Application by For Existence, and check are submitted	reign Limited Liability Company for Authorization to Transact Business in Florida ed to register the above referenced foreign limited liability company to transact bus	," Ceri iness i
Please return all correspondence	concerning this matter to the following:	
STANLEY RA	SHKIN	
<del></del>	Name of Person	•
Human capi	TAL SELECT LLCburn	
<del></del>	Pirm/Company	
2680 S VAL VI	STA DRIVE SUITE 152	
	Address	,
GILBERT, AZ	35295	
	City/State and Zip Code	
Waltergabs	TAFFING.COM	
	E-mail address: (to be used for intere annual report polification)	
For further information concerning	this matter, please call:	,
WALTER VASQUEZ	at ( 480 ) 345-6668	
Name o	Contact Person Area Code Daysime Telephone Number	•
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations Registration Section	Division of Corporations  Registration Section	
P.O. Box 6327	Clifton Building	
Tallaharsee, FL 32314	266i Bastutive Center Circle Tallalussee, FL 32301	
	ollowing amount:	

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

IN COMPLIANCE WITH SECTION 605,0902 FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. HUMAN CAPITAL SELECT LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or "LLC.") **HEALTH CARE SELECT LLC** (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liobility Company," "L.L.C," or "LLC.") 2 ARIONA 3. 45-3263801 (Jurisdiction under the law of which foreign limited Hability company is organized) (FEI mmber, if applicable) 4. 05/07/2014 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 2680 S VAL VISTA DRIVE SUITE 152 GILBERT, AZ 85295 (Street Address of Principal Office) 6, 2680 S VAL VISTA DRIVE SUITE 152 GILBERT, AZ 85295 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  $\overset{CP}{\sim}$ STANLEY RASHKIN - Member - 2680 S Val Vista Drive Suite 152 Gilbert, AZ 85295 EVAN BURKS - Member - 2680 S Val Vista Drive Suite 152 Gilbert, AZ 85295 TRAVISSCHUGG- Member - 2680 S Val Vista Drive Suite 152 Gilbert, AZ 85295 8. 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 pensistion of the certificate under cath of the translator must be submitted)

STANLEY RASHKIN

Typed or printed name of signed

Signature of an authorized person

(in accordance with section 603.0303, F.S., the execution of this document constitutes on a filtration under the penalties of perjury that the facts stated berein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree falsay as provided for in a \$17.135, F.S.)

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	CAPITAL SELECT LLC		
If unavail	able, the alternate to be use	d in the state of Plorida is:	
HEALTH	CARE SELECT LLC		
2. The ru	ume and the Florida street ac	ddress of the registered agent and office ar	e:
	C T Corporation System	1	
•		(Name)	
	1200 South Pine Island	Road	
	Florida St	treet Address (P.O. Box NOT ACCEPTABLE)	1 5"
	Plantation	FL 33324	
	•	City/State/Zip	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
liability or registered	ompany at the place designa lagent and agree to act in th lating to the proper and con	nt and to accept service of process for the a sted in this certificate, I hereby accept the a sis capacity. I further agree to comply with apleto performance of my duties, and I am j as registered agent as provided for in Chap	ppointment as the provisions of all amiliar with and
stabiles re accept the Stabiles.	•	,	
accept the	CT Corporation Syst	sains us	
accept the	Ву:	(Signature) - Asst. Secy.	



# STATE OF ARIZONA



# Office of the CORPORATION COMMISSION

#### CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby. arphi certify that

### \*\*\*HUMAN CAPITAL SELECT, LLC\*\*\*

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 31st day of August 2011.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 6th Day of May, 2014, A. D.



John A. Jerich, Executive Director

1060034

