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SECRETARY OF STATE DIVISION OF CORPORATION

#### COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: U.S. Personnel X L.P.  (Name of Foreign Limited Partnership or Limited Liability Limited Partnership)		
The enclosed application, certificate of state	us and fees are submitted to register a foreign ed partnership to transact business in Florida.	
Miriam Schoenig		
(Contact Person)		
The Nugent Law Firm, P.C.		
(Firm/Company)		
215 W Oak St, 10th Floor		
(Address)		
Fort Collins, CO 80521		
(City, State and Zip Code)	<del></del>	
For further information concerning this mat	tter, please call:	
Miriam Schoenig	at (970 ) 482-1056	
(Name of Contact Person)	at (970 ) 482-1056 (Area Code and Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
□\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) □\$1,008.75 Filing Fees and Certificate of Status	S1,052.50 Filing Fees and Certified Copy Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P. O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	

#### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

1. U.S. Personnel X L.P.	
(Name of Limited Partnership or Limited Liability Limited Acceptable Limited Partnership suffixes: Limited Partnership, L Acceptable Limited Liability Limited Partnership suffixes: Limit	imited, L.P., LP, or Ltd.
or LLLP.	
(If name unavailable, name under which the limited partnersh proposes to register to transact business in Florida; n	
2. Delaware 3. Octo	ber 10, 2000
(State or Country of Formation)	(Date of Formation)
4. CT Corporation System	
(Name of Registered Agent for Serv	ce of Process)
<sub>5.</sub> 1200 S Pine Island Rd	
(Florida street address for Registe	red Agent)
Plantation FL 33324	
6. I hereby accept the appointment as registered agent and agre comply with the provisions of all statutes relative to the proper a and I am familiar with an accept the obligations of my position a	nd complete performance of my duties,
Mell	
401/1	Michael E. Jones Assistant Secretary
Signature of Registered A	gent Assistant Osciolary
7, 222 W Las Colinas Bivd Ste 900	
(Principal office address	)
Irving TX 75039	
8. If limited partnership is a limited liability limited pa	urtnership, check box

9, 222 W Las Colinas Blvd St	e 900
	(Mailing address)
Irving TX 75039	
10. Name, principal office address, and mailing address of each general partner:	
USP Holding, Inc.	222 W Las Colinas Blvd Ste 900
(Name)	Irving TX 75039 (Street Address)
100 (10	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)

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(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
11. Effective date, if other than the date of filing:_ (Effective date cannot be prior to nor mor filed by the Florida Department of State.)	re than 90 days after the date this document is
to the delivery of this application to the Fl	luly authenticated, not more than 90 days prior lorida Department of State, by the Secretary of the entity's records in the jurisdiction under the
Signed this 12 day of	October 20 06.
Signature of a general partner:	

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\$52.50 \$8.75

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Filing Fees: Certified Copy (optional): Certificate of Status (optional):

## Delaware

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### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "U.S. PERSONNEL X L.P." 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 TWENTY-THIRD DAY OF OCTOBER, A.D. 2006.

A CONTRACTOR OF THE PARTY OF TH

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5138479

DATE: 10-23-06

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