CAPITA reet, Suite 1 • T 417 E. Virginia (850) 224-8870

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	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitions Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
7	Photo Copy
	Certificate of Good Standing
	Certificate of Status
(5)	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
,	Vehicle Search
	Driving Record
Requested by: Olioles 10153	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 12, 2000

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: EMPLOYMENT TRADITIONS, INC.

Ref. Number: W00000022302



We have received your document for EMPLOYMENT TRADITIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In addition to the application, you must please submit a CERTIFICATE OF EXISTENCE from Michigan. We must have an original certificate dated within the past 90 days.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

10 rected

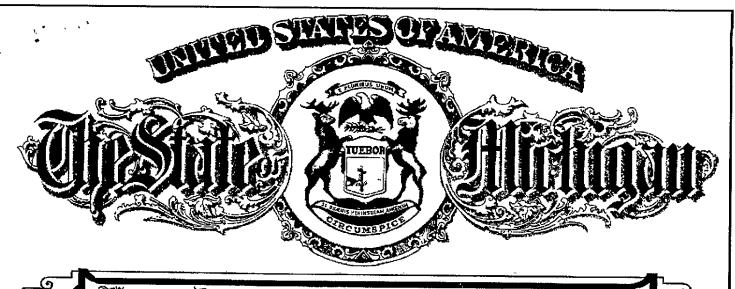
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.			
1. Employ Ment Traditions, Inc. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) Michigan 3. 38-3122062			
(State or country under the law of which it is incorporated) (FEI number, if applicable)			
4. (Date of incorporation) 5. (Duration: Year corp. will cease to existor "perpetual")			
6. Have not done Yet!! (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)			
7. 8980 N. Rodgers Drive suite A			
Caledonia MI 49316 (Current mailing address)			
8. Employment Services / Employee Leasing (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)			
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)			
Name: Capital Connection, Inc. Office Address: 417 E. Virginia St, Suite!			
Tallahassee , Florida, 32301 (Zip code)			
10. Registered agent's acceptance:			
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.			
Capital Considered agent's signature) 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.			

_	(Street address only - P.O. Box NOT acceptable)	%
	trick L. nortgenery	
Address:	10333 E. Rivershore	
	AHO MI 49302	
	PATRICE L. Montyonery	
	10333 E. Rivershore	
	Alto MI 49302	
Director:		
Address:		
Director:		
Address.		· · · · · · · · · · · · · · · · · · ·
B. OFFICER	S (Street address only - P.O. Box NOT acceptable)	
President:	PATTICK L. Montgomery	
	10333 E. Rivershore	
	Alto MI 49302	
	PATRICK L. Montgonery	
	10333 E. Rivershore	
Martiness, "	Alto NI 49302	
Scoretary:		
4 2 decree	10333 E. Rivershore	
Address:	Alto MI 49302	
Treasurer:	10333 E. Rivershore	
Address:	Alto MI 49302	
	A CONTRACTOR OF THE CONTRACTOR	Piace and/or directors
NOTE: If not	ressary, you may attach an addendum to the application listing additional of	•
13	(Signature of Chairman, Vice Chairman, or an Lofficer listed in number	12 of the application)
14	Patrick L. Montgoners. (Eo and Pres	ident
14	(Typed or printed name and capacity of person signing	g application)



lichigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

EMPLOYMENT TRADITIONS, INC.

SEP 19 PH 2: 09
SECRETARY OF STATE
STATE OF STATE

was validly incorporated on July 15, 1993, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this State.

This certificate is issued to attest to the fact that the corporation is in good standing in this office as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose. It is in the usual 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.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 14th day of September, 2000.

Corporation, Securities and Land Development Bureau

173 0518488

for / left , Director

GOLD SEAL APPEARS ONLY ON ORIGINAL