F02000002156

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Workforce One The (Name of corporation - must include suffix)			
Dear Sir or Madam:		-	
The enclosed "Application by Foreign Corporation for Authorization to Transact Busin "Certificate of Existence", and check are submitted to register the above referenced for transact business in Florida.	ness in Florida" reign corporatio COSS48 -04/25/02	n	— 7
Please return all correspondence concerning this matter to the following:	*****70.00) ******70	.00
Ms. Laurel Seebach			
(Name of Person) Work force One Inc			
(Firm/Company) 235 Interstate Ly	SECRE TALLA) A	
Ms. Laure 1 Secbach (Name of Person) Work force One, Inc (Firm/Company) 235 Interstate Ln (Address) Waterbury, CT 06705 (City/State and Zip code)	TARY O	3 II	2 —
(City/State and Zip code) For further information concerning this matter, please call:		§ .> .>	
Bets, P. Preble CPA at (860) 282 - 0440 (Name of Person) (Area Code & Daytime Telephone Nu	mber)		
STREET ADDRESS: MAILING ADDRESS:			

Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$\ \$70.00 \text{ Filing Fee & Certificate of Status}

☐ \$78.75 Filing Fee & Certified Copy

☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

FO2-2156

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.

(Name of corpo words or abbre	oration; must include the word "INCORPORATE viations of like import in language as will clearly or partnership if not so contained in the name at 1	indicate that it is a corporation instead of a
2. Connec	y under the law of which it is incorporated)	06-1390093 (FEI number, if applicable)
4. Janua	te of incorporation) 5.	perpetual (Duration: Year corp. will cease to exist or "perpetual")
6. Upon	n qualification acted business in Florida. If corporation has not	transacted business in Florida, insert "upon qualification.") 607.1502 and 817.155, F.S.)
7. 235 I	Interstate Ln. Water (Principal office addr	bury CT 06705
Sam	•	02 ALLA
8. Tempo (Purpose)	(Current mailing addr orary employment age (s) of corporation authorized in home state or cor	AR 2
		24.N
Name:	Loretta Seebach	 :
Office Address:	Lovetta Scebach 6920 SE Marina W Stuart (City)	23496
	(City)	(Zip code)
10. Registered a Having been nar designated in thi further agree to	agent's acceptance: med as registered agent and to accept servi is application, I hereby accept the appointm	e of process for the above stated corporation at the place ent as registered agent and agree to act in this capacity viative to the proper and complete performance of my

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.

(Registered agent's signature)

12.	Names and	business	addresses	of officers	and/or	directors:
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A. DIRECTORS	,
Chairman:	
Address:	
3.	
Vice Chairman:	
Address:	
Director: Charles W. Marshall	
address: 252-Banton Lake Rd Morris CT 06763	
Morris CT 06763	
Director: Laurel Seebach	
Address: 726 South St.	
Middle bury CT 06762	02 SEC
3. OFFICERS	APR APR RETA AHAS
President: Laurel Seebach	25 25 25 25 25 25 25 25 25
Address: 726 South St	
Middlebury CT 06762	2: 25 2: 25 2: 25 2: 25
Vice President:	G . 30.
Address:	
secretary: Charles W. Marshall	
Address: 252 Bartam Lake Rd Morris CT 06763	
reasurer:	
Address:	
NOTE: If necessary you may attach an addendum to the application listing additional officer	rs and/or directors.
Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the application)
4. Laurel Sechach President (Typed or printed name and capacity of person signing application)	
(Typed or printed name and capacity of person signing application)	

61,-65 Rov. 2/94

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that

WORKFORCE ONE, INC.

incorporated under the laws of Connecticut is in existence.

Secretary of the State

O2 APR 25 PM 2: 2:
SECRETARY OF STATE
TALLAHASSEE EI COICE

Date Issued: April 3, 2002