

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City/	State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
		}

Office Use Only



900008898669

11/19/02--01050--006 **78.75

PILED

02 NOV 19 AN 9: 34

SECRETARY CE STATE
FALLAHASSEE, FLORIDA

MK

TRANSMITTAL LETTER

Tổ:	Régistration Section			\ ;		
•	Division of Corporations					
SUBJE	ECT: CONFEDERATED	EMPLOYERS & BI	ENEFITS COM	IPANY, II	NC.	
		(Name of	corporation - mu	st include su	ffix)	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Dear S	ir or Madam:			_		
	closed "Application by Fornce", and check are submitt					
Please	return all correspondence c	oncerning this matter t	o the following:	· —	-1 	SEC S
CHRI	STOPHER L. GILLES				<u>'</u>	图 2
		(Na	me of Person)	· ===	,- 2	ST O T
HEND	RICKS & GILLESPI					1000 至
		(Fir	m/Company)	_		STATE STATE
3125	INDEPENDENCE DR	IVE, SUITE 101		-		
			(Address)	_		
HOME	WOOD, ALABAMA 3	5209		<u>-</u>		
		(City/Si	ate and Zip code)		
For fur	rther information concernin	g this matter, please ca	11:			
		-				
-CHRI	ISTOPHER L. GILLE	SPIE at	205-871-	1212		
	(Name of Person)		de & Daytime T	elephone Nu	mber)	, .
STRE	ET ADDRESS:		MAILING AD	DRESS:		
	ration Section	_	Registration Se	· -		
	on of Corporations	-	Division of Cor	~ -		
	Gaines St. assee, FL 32399		P.O. Box 6327 Tallahassee, FL			4 - 2
			,	~·*:		
Enclos	ed is a check for the follow	ing amount:		•	-	
\$	70.00 Filing Fee X	\$78.75 Filing Fee & Certificate of Status		Filing Fee & Copy		587.50 Filing Fee, Certificate of Status & Certified Copy

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,_		RATED EMPLOYERS & BENEFITS			PROP INTO III		
	words or abbre	poration; must include the word "INCORPORA eviations of like import in language as will cle to or partnership if not so contained in the nam	arly	indicate that it is a corp			
2.		UNITED STATES	3.	63-1116312			
	(State or coun	try under the law of which it is incorporated)		(FEI	number, if appli	cab (5)	
4.	APRIL 11		5.	PERPETUAL		多 夏 丁	
		(Date of incorporation)		(Duration: Year co	rp. will cease to	exist or perpe	tual")
6.		ALIFICATION				MS E	0
	(Date first tra	nsacted business in Florida. If corporation has (SEE SECTIONS 607.150	not 1, 60	transacted business in I 07.1502 and 817.155, F.	Florida, insert "u S.)	por Glalificati	on.")
7.	600 VES	FAVIA PARKWAY, SUITE 160, I			AMA 3521	6	
		(Principal	offic	e address)			
٠.	(SAME AS	S ABOVE)	•1•	: <u> </u>			<u>-</u>
		(Current m	121111	ig address)			
<u>8.</u>	TO ENGA	SE IN THE BUSINESS OF PROVI	DI	NG EMPLOYEE L	EASING SE	RVICES	
	(1	Purpose(s) of corporation authorized in home	state	or country to be carried	l out in state of h	lorida)	
9.	Name and <u>st</u>	reet address of Florida registered agent:	(P.	O. Box or Mail Drop I	Box <u>NOT</u> acce	ptable)	
· •	Name:	BUSINESS FILINGS INCORPOR	ATI	ED a	er er i 1		s *
ŌЩ	ce Address:	1000 WEST AVENUE, SUITE 1	<u>11 (</u>	<u> </u>		·•·	ž
-		MIAMI BEACH, FLORIDA		,_Florida	33139		
		(City)		~	(Zip code)	— <u>-</u> • •	-
10.	Registered a	gent's acceptance:					
Hav	ing been nan	ned as registered agent and to accept serv	ice (of process for the abo	ve stated corpo	ration at the	place
aesi	gnated in thi	s application. I hereby accept the appoint	men	t as registered agent .	and agree to a	rt in this cand	icity I

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.

(Registered 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.

12. Names and business addresses of officers and/or directors

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	· -
Chairman: LEON R. GORMAN, JR.	
Address: 1420 BRANCHWATER CIRCLE	
BIRMINGHAM, ALABAMA 35216	
Vice Chairman: RAYMOND L. FOUSHEE	en e
Address: 2412 5TH PLACE NW	7:08
BIRMINGHAM, ALABAMA 35215	
Director: RANDY GORMAN	
Address: 3613 MOUNTAIN LANE	SEE O
MOUNTAIN BROOK, ALABAMA 35213	
Director: LARRY WHITEHEAD	
Address: 2528 DOLLY RIDGE ROAD	
BIRMINGHAM, ALABAMA 35243	-
B. OFFICERS	
President: RAYMOND L. FOUSHEE	
Address: 2412 5TH PLACE NW	The second secon
BIRMINGHAM, ALABAMA 35215	, man
Vice President: VICKEY REASONOVER	
Address: 3056 QUEENSTOWN ROAD	
TRUSSVILLE, ALABAMA 35173	
Secretary: VICKEY REASONOVER	
Address: (SAME)	
Treasurer: VICKEY REASONOVER	
Address: (SAME)	_
NOTE: If necessary you may attach an addendum to the application	listing additional officers and/or directors
VIXIIIII.	instring additional officers and/of directors.
13. (Signature of Chairman, Vice Chairman, or any officer	listed in number 12 of the application)

FOUSHEE, PRESIDENT
(Typed or printed name and capacity of person signing application)

STF FL32376F.2

ADDENDUM OF ADDITIONAL DIRECTORS AND OFFICERS

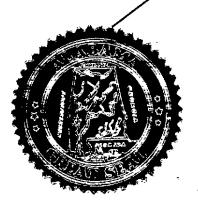
12. Names and business addresses of officers and/or directors:

A. DIRECTORS		
Chairman:	and the second s	
Address:		
/ice Chairman:		
Address:		4,
		-
- -	- 15 P	
Address: 4620 OLD LOONEY MILL ROAD	- 美色色	
BIRMINGHAM, ALABAMA 35243	= 33	ED 3
Director:		?
Address:	ALC: C	25
B. OFFICERS	- <u>-</u>	
resident:		
Address:		
vice President: WAYNE DUTT	•	
Address: 3425 COLLINGWOOD ROAD		., .
HOOVER, ALABAMA 35226		
ecretary:		4 * * * *
Address:		
reasurer:		
Address:		
NOTE: If necessary, for may attack an addendum to the applicati	on listing additional officers and/or directors	
· A AMICA	72. Ç <u>â</u>	
(Signature of Chairman, Vice Chairman, or any office	cer listed in number 12 of the application)	
4. RAYMOND L. FOUSHEE, PRESIDENT (Typed or printed name and capacity of	-	

State of Alabama

I, Jim Bennett, Secretary of State of the State \overline{o} f Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Confederated Employers & Benefits Company, Inc. incorporated in Jefferson County, Birmingham, Alabama on April 11, 1994. I further certify that the records do not disclose that said Confederated Employers & Benefits Company, Inc. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

November 4, 2002

Date

fin remin

Secretary of State