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(Requestor's Name)	7 STATE 1 10 MOA
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(Address) (City/State/Zip/Phone #)	
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(Business Entity Name) (Document Number)	06/30/0401026002 ***87
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TRANSMITTAL LETTER



Certified Copy

TO: Registration Section Division of Corporations	200 JUN 30 P 3: 07		
SUBJECT: HUNTER PAYROLL SERVICE	TATIVE IARY OF CTU		
(Name of corporation - must include suffix)			
Dear Sir or Madam:			
** * * * * * * * * * * * * * * * * * *	tion for Authorization to Transact Business in Florida", itted to register the above referenced foreign corporation		
Please return all correspondence concerning this	s matter to the following:		
SHAREN HUNTER			
·	Name of Person)		
HUNTER SERVICES			
(F	Firm/Company)		
1869 EAST AURORA ROAD, SUITE	100		
TWINSBURG, OHIO 44087	(Address)		
(City	//State and Zip code)		
For further information concerning this matter,	please call:		
SHAREN HUNTER 3	330 487–5300		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Statu	• • • • • • • • • • • • • • • • • • • •		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBM REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA 2004 JUN 30 HUNTER PAYROLL SERVICE, INC. 1. (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 natural person or partnership if not so contained in the name at present.) OHIO (State or country under the law of which it is incorporated) (FEI number, if applicable) 5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual") UPON QUALIFICATION (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 1869 EAST AURORA ROAD SUITE 100, TWINSBURG OHIO 44087 (Principal office address) P.O. BOX 557, TWINSBURG OHIO 44087 (Current mailing address) HUMAN RESOURCE SERVICES (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) DAVID R. TSCHANTZ Name: 221 SOUTH BAHAMA AVE. Office Address:

10. Registered agent's acceptance:

MARCO ISLAND

(City)

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:

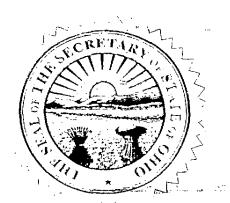
A. DIRECTO	ORS		Large B. B. Braine Ber
Chairman:	DAVID R. TSCHANTZ		<u> </u>
Address:	221 SOUTH BAHAMA AVE., MARCO ISLAND, FLORIDA	34145	₹004 JUN 30 P 3: 07
-			SECRETARY HE STATE
Vice Chairman:	·	. == - ,	TALLAHASSEE FLORIDA
Address:			·
Director:			
			-
			•
Address:			
		····	
B. OFFICER	RS		
President:	SHAREN HUNTER		
Address:	1869 EAST AURORA ROAD SUITE 100		
	TWINSBURG, OHIO 44087		
			<i>,</i> ,
Address:			
Secretary:	DAVID R. TSCHANTZ		Le pin-
Address:	221 SOUTH BAHAMA AVE., MARCO ISLAND, FLORID.	A 34145	
Treasurer:		-	
Address:			
NOTE: If neo	cessary, you may attach an addendum to the application listin	g additiona	al officers and/or directors.
13	Therew Hunter		10.04 2.0
	(Signature of Chairman, Vice Chairman, or any officer list		er 12 of the application)
14	SHAREN HUNTER PRESIDEN (Typed or printed name and capacity of person sign		ation)

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

FILED

SECRETARY OF STATE

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show HUNTER PAYROLL SERVICE, INC., an Ohio Corporation, Charter No. 1381836, having its principal location in Aurora, County of Portage, was incorporated on April 15, 2003, and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 8th day of June, A.D. 2004.

Ohio Secretary of State

Validation Number: 200415902920