F050(E) 3762

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only

PF/ARis - #2100



600047128936

06/24/05-01002-008 **2600.00

02/24/05--01027--003 **:0.00

FILED

TRANSMITTAL LETTER

2005 JUN 22 P 12: 20

-SECRETURY OF

TO:		stration Serion of Con	ction porations			SECRETARY OF S TALLAHASSEE, FL
SUBJ		Empo Co	-			
5020	2011			ame of corporat	ion - must include su	iffix)
Dear S	Sir or M	ſadam:				
"Certi	ficate o		e", and check			ransact Business in Florida", eferenced foreign corporation to
Please	return	all corresp	ondence conc	erning this matt	er to the following:	
Miche	lle <u>H</u> ay	es				
				(Name	of Person)	
Empo	Corpo	ration				
				(Firm/C	Company)	
3100	West L	ake Stree	, Suite 100			
				(Ad	dress)	
Minne	apolis,	MN 5541	6			
	,			(City/State	e and Zip code)	
For fu	rther in	formation	concerning thi	is matter, please	call:	
Michel	le Haye	es		at (612) 285-6270	
	(Nan	ne of Pers	on)		a Code & Daytime To	elephone Number)
Regist Divisi 409 E.	ration S on of C Gaines	orporation			MAILING ADD Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations
Enclos	sed is a	check for	the following	amount:		
Ø \$70).00 Fil	ing Fee	S78.75 Fi	iling Fee & ate of Status	☐ \$78.75 Filing Fee Certified Copy	& 🗇 \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2005 JUN 22 P 12: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 1, 2005

MICHELLE HAYES 3100 WEST LAKE STREET SUITE 100 MINNEAPOLIS, MN 55416

SUBJECT: EMPO CORPORATION Ref. Number: W05000010434

We have received your document for EMPO CORPORATION and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$4,600.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 105A00014154



EMPO Corporation

3100 W. Lake Street, Suite 100 Minneapolis, MN 55416-4510

612-285 6707 888-263-0589 (foll fee) D 612-285-8708 (fax) www.filfingospra.com P 12: 2

April 21, 2005

Ms. Agnes Lunt Document Specialist PO Box 6327 Tallahassee, FL 32314

Dear Ms.Lunt:

Empo Corporation (Ref # W05000010434) is a Professional Employer Organization located in Minnesota. We have received letter number 105A00014154 stating we owe the State of Florida penalty fees totaling \$4600.00 related to our failure to file for registration. Empo Corporation was unaware of the filing requirements in the State of Florida pertaining to foreign qualification. As soon as we became aware of the requirements we acted expeditiously to fill out and file the necessary forms. We hereby respectfully request a waiver of the penalties that have been assessed as a result of this misunderstanding.

Sincerely,

Bob Ringstad General Manager Empo Corporation



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2005 JUN 22 P 12: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 17, 2005

BOB RINGSTAD, GENERAL MANAGER EMPO CORPORATION 3100 W. LAKE ST., SUITE 100 MINNEAPOLIS, MN 55416-4510

SUBJECT: EMPO CORPORATION Ref. Number: W05000010434

We have received your document for EMPO CORPORATION and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Based on the information you have provided and in accordance with s.607.1502(4), 608.502(4) or 617.1502(4), F.S., this office will reduce the civil penalty of \$1,000 per year to \$500 per year for each year this entity transacted business or conducted its affairs in Florida prior to qualification. Therefore, the total amount due to cover both annual report/uniform business report and penalty fees is \$2,600.00.

The total amount due is \$2670.00.

There is a balance due of \$2600.00.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock Senior Section Administrator

Letter Number: 305A00035369

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 JUN 22 P 12: 20

1.	Empo Corporation	SECRETARY OF STATE
	(Enter name of corporation; must include "INCORPO! "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	RATED," "COMPANY," "CORPORATION, "ALLAHASSEE, FLORI
	(If name unavailable in Florida, enter alternate corpora	ate name adopted for the purpose of transacting business in Florida)
2	Minnesota	
	(State or country under the law of which it is incorpora	3. 41-1943030 (FEI number, if applicable)
4.	4/8/1999	5_ perpetual
``	(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6.	1/1/2001	
ν.	(Date first transacted business in Florida. If corporatio	on has not transacted business in Florida, insert "upon qualification.") 607.1501, 607.1502 and 817.155, F.S.)
7.	3100 West Lake Street, Suite 100 Minneapolis, M	MN 55416
	(Principal of	ffice address)
	3100 West Lake Street, Suite 100 Minneapolis, M	1N 55416
	(Current ma	iling address)
	5	
8.	Professional Employer Organization	state or country to be carried out in state of Florida)
	(Purpose(s) of corporation authorized in nome s	tate of 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: NRAI Services, Inc.	
Oi	ffice Address: 526 E. Park Avenue	
	Tallahassee	Florida 32301 (Zip code)
	(City)	(Zip code)
Hi de fu	esignated in this application, I hereby accept the a	ept service of process for the above stated corporation at the place appointment as registered agent and agree to act in this capacity. I tatutes relative to the proper and complete performance of my duties of my position as registered agent.

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:

NRAI Services, Inc.

A. DIRECTORS	FILED
Chairman:	
Address:	7005 .NN 22 ₽ 12: 20
	SECRETARY OF STATE
Vice Chairman:	TALLAHASSEE, FLORIDA
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Alan Reid	
Address: 3100 West Lake Street, Suite 100	
Minneapolis, MN 55416	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer: Victor Thompson	
Address: 3100 West Lake Street, Suite 100 Minneapolis, MN 55416	
Audiess.	
NOTE: If necessary, you may attach an addendum to the application listing ad	lditional officers and/or directors.
13. Man beid	
(Signature of Director or Officer listed in number 12 of the app	lication)
14 Alan Reid President/CEO	

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

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

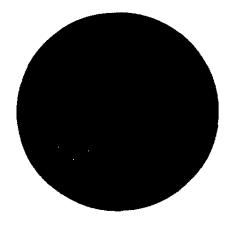
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: EMPO Corporation

Date Formed: 04/08/1999

Chapter Governed By: 302A

This certificate has been issued on 01/12/05.



Mary Kiffmager Secretary of State.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO LED

1. Empo Corporation	ED," "COMPANY," "CORPORATION," $22 P 12: 20$
(Enter name of corporation; must include "INCORPORAT" Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION," SECRETARY OF STATE TALLAHASSEE. FLORIDA
(If name unavailable in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)
2. Minnesota	3. 41-1943030
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4, 4/8/1999	5. perpetual
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. 1/1/2001	
(Date first transacted business in Florida. If corporation has	s not transacted business in Florida, insert "upon qualification.") 1501, 607.1502 and 817.155, F.S.)
7, 3100 West Lake Street, Suite 100 Minneapolis, MN !	55416
(Principal office	address)
3100 West Lake Street, Suite 100 Minneapolis, MN 5	55416
(Current mailing	
Professional Employer Organization (Purpose(s) of corporation authorized in home state of the state	or country to be carried out in state of Florida)
9. Name and street address of Florida registered age	nt: (P.O. Box or Mail Drop Box NOT acceptable)
Name: NRAI Services, Inc.	
Office Address: 526 E. Park Avenue	
Tallahassee	, Florida 32301
(City)	(Zip code)
designated in this application, I hereby accept the appo	service of process for the above stated corporation at the place wintment as registered agent and agree to act in this capacity. I tes relative to the proper and complete performance of my duties, y position as registered agent.
NRAI Services, Inc.	
By: Christer Elaha	1-24-2005
(Registered agent's signat	ture)

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. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Alan Reid
Address: 3100 West Lake Street, Suite 100
Minneapolis, MN 55416
Vice President:
Address:
Secretary:
Address:
Treasurer: Victor Thompson
Address: 3100 West Lake Street, Suite 100 Minneapolis, MN 55416
7144.555
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Clan beid
(Signature of Director or Officer listed in number 12 of the application)
14. Alan Reid President/CEO (Typed or printed name and capacity of person signing application)