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TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

Alternative Workforce, Inc.

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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. Alternative Workforce, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Ohio

(State or country under the law of which it is incorporated)

3. 34-1691929

(FBI number, if applicable)

4. 09-18-1991

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1300 Combermere, Troy, Michigan 48083

(Principal office address)

1300 Combermere, Troy, Michigan 48083

(Current mailing address)

8. Any lawful activity, including staff and vehicle drive away/delivery service.

(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 NOT acceptable)

Name: **CT Corporation**

Office Address: **1200 SOUTH PINE ISLAND ROAD**

PLANTATION

(City)

, Florida **33324**

(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.*

Claudia L. Saari

(Registered agent's signature)

**Claudia L. Saari
Asst. Secretary**

**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.**

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

A. DIRECTORS

Chairman: Raymond E. Huffmaster

Address: 1300 Combermere Drive

Troy

MI

48083

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Gregory Johnson

Address: 1300 Combermere Drive

Troy

MI

48083

Vice President: _____

Address: _____

Secretary: Peter Johnson

Address: 1300 Combermere, Troy, Michigan 48083

Treasurer: Peter Johnson

Address: 1300 Combermere, Troy, Michigan 48083

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Peter Johnson, EXECUTIVE V.P.

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

**United States of America
State of Ohio
Office of the Secretary of State**

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*I, Jennifer Brunner, 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 business entities; that said records show **ALTERNATIVE WORKFORCE, INC.**, an Ohio corporation, Charter No. 803159, having its principal location in Akron, County of Summit, was incorporated on September 18, 1991 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 February, A.D. 2008*

A handwritten signature in cursive script, appearing to read "Jennifer Brunner".

Ohio Secretary of State

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