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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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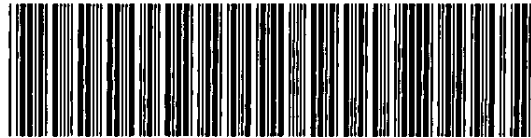
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

1/4

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AllSourcePPS, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael A. Hoyal

Name of Person

AllSourcePPS, Inc.

Firm/Company

8330 W Sahara Ave., Suite 140

Address

Las Vegas, NV 89117

City/State and Zip code

taxdepartment@ain1.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael A. Hoyal

Name of Person

at (800) 872-2677

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 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. AllSourcePPS, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Nevada 3. 46-1265921
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. October 24, 2012 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. January 01, 2013
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8330 W Sahara Ave., Suite 140, Las Vegas, NV 89117
(Principal office address)
8330 W Sahara Ave., Suite 140, Las Vegas, NV 89117
(Current mailing address)

8. To transact business as a payroll processing services company.
(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)

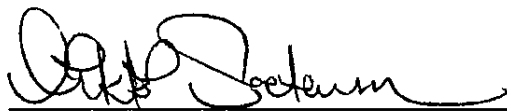
Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (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.

 Vikki Saetern, Asst. Sec.
(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.

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

A. DIRECTORS

Chairman: SEE ATTACHED ADDENDUM

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Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SEE ATTACHED ADDENDUM

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

Signature of Director or Officer

11/12/12

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. MICHAEL A. HOYAL, CFO

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

Names and Addresses of the Board of Directors

Name	Address	City	State	Zip Code
Janice B. Howroyd	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117
Brett W. Howroyd	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117
Bernard Howroyd	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117
Michael A. Hoyal	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117
Katharyn Howroyd	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117

Initial List of Officers

Name	Position	Address	City	State	Zip Code
Janice B. Howroyd	CEO	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117
Brett W. Howroyd	PRESIDENT	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117
Michael A. Hoyal	SECRETARY	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117
Michael A. Hoyal	CFO	8330 W. Sahara Ave., Suite 140	Las Vegas	Nevada	89117

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TALLAHASSEE, FLORIDA


CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **ALLSOURCEPPS INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 24, 2012, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 27, 2012.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20121027-0196
You may verify this electronic certificate
online at <http://www.nvsos.gov/>