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PICK-UP	☐ WAIT	MAIL				
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Certified Copies	_ Certificate	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



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## **COVER LETTER**

TO: New Filing Section Division of Corporations							
SUBJECT: Applied Resources, Inc							
Name of corporation - must include suffix							
Dear Sir or Madam:							
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	Standing" and check are submitted to register						
Please return all correspondence concerning this ma	atter to the following:						
Anthony Falzone							
Name	e of Person						
Applied Resources, Inc							
Firm/C	Company						
2899 E. Big Beaver Road, #120							
A	ddress						
Troy, MI 48083							
·	ate and Zip code						
afalzone@appliedpayroll.com		<del></del>					
E-mail address: (to be us	sed for future annual report notification)						
For further information concerning this matter, plea	ase call:						
Anthony Falzone 248	498-4011						
	rea Code & Daytime Telephone Number	13 J					
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	HILL PH 3: 56					
Enclosed is a check for the following amount:		O.					
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Ser.50 Filing Certified Copy Certificate of Certified Co	of Status &					

# 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,	Applied Resources, I						
	(Enter name of corpo "Inc.," "Co.," "Corp,"	ration; must include "INCORPORATI" "Inc," "Co," or "Corp.")	ED,'	' "COMPANY," "CORPORATION,"			
	Applied Resources o	fTX, Inc			_		
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
2.	TX		3.	90-0891720			
		r the law of which it is incorporated)	•	(FEI number, if applicable)			
4.	9/27/2012		5.	Perpetual			
	(Date of in	ocorporation)		(Duration: Year corp., will cease to exist or "perpetual"	')		
6.			_				
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)							
	4000 H D' D D	•	,,,1.	502, F.S., to determine penalty habitity)			
7. 2899 E. Big Beaver Road, #120, Troy, MI 48083							
	(Principal office address) 2899 E. Big Beaver Road, #120, Troy, MI 48083						
	2099 E. Dig Beaver K	(Current mailing	add	enan)	<u> </u>		
		(Current maning	auu	1035)			
8	Retail Merchandiser					1	
One and a first and in home state or countries he coming out in state of Clarida						-	
9	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)					3	
•		T Corporation System	(- ,-		7	من د د	
	Name:	- Corporation Officer		**	PH.		
O	ffice Address:	200 South Pine Island Road			ယ် ္	. دي. ارځ د	
		Plantation			אר – אר	7	
	_	(City)		(Zip code)		⊋⊓ 2	
		• • •		• •	•	-	

#### 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.

By: Katle Szramek
Assistant Secretary

(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.

Chairman:	12. Names and business addresses of officers and/or directors:	WHEN A DOOM ATOUS		
Address:  Director: Anthony Falzone Address:  2899 E. Big Beaver Road, #120 Troy, MI 48083  Director: Address: B. OFFICERS President: Address: 2899 E. Big Beaver Road, #120 Troy, MI 48083  Vice President: Address:  Secretary: Address: Treasurer: Address: Treasurer: Address: Treasurer: Treasurer: Address: Treasurer: Address: Treasurer: Treasurer: Address: Director of Director of Officer of Dire	A. DIRECTORS			
Vice Chairman:  Address:  Director:  Adthony Falzone  2899 E. Big Beaver Road, #120  Troy, MI 48083  Director:  Address:  B. OFFICERS  President:  Anthony Falzone  2899 E. Big Beaver Road, #120  Troy, MI 48083  Vice President:  Address:  2899 E. Big Beaver Road, #120  Troy, MI 48083  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  The officer or director signing this document (end who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that flashs information submitted in a document to the Department of State constitutes	Chairman:	13 JAN 14 PM 3: 56		
Address:  Director: Address:  2899 E. Big Beaver Road, #120 Troy, MI 48083  Director: Address:  B. OFFICERS  President: Anthony Falzone  2899 E. Big Beaver Road, #120 Troy, MI 48083  Vice President: Address:  Secretary: Address:  Treasurer: Address:  Treasurer: Address:  Treasurer: Address:  NOTE: If necessary, you may attach an addendum to the application/listing addronal officers and/or directors.  Signature of Director or Officer 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	Address:			
Director:  Address:  2899 E. Big Beaver Road, #120  Troy, MI 48083  Director:  Address:  B. OFFICERS  President:  Address:  2899 E. Big Beaver Road, #120  Troy, MI 48083  Vice President:  Address:  Secretary:  Address:  Treasurer:  Address:  Treasurer:  Address:  Treasurer:  Address:  NOTE: If necessary, you may attach an addendum to the application/listing addronal officers and/or directors.  Signstare of Director or Officer  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	Vice Chairman:			
Address:  2899 E. Big Beaver Road, #120  Troy, MI 48083  Director:  Address:  B. OFFICERS  President:  Anthony Falzone  Address:  2899 E. Big Beaver Road, #120  Troy, MI 48083  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  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	Address:			
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B. OFFICERS  President: Anthony Falzone  Address: 2899 E. Big Beaver Road, #120  Troy, MI 48083  Vice President: Address: Secretary: Address: Treasurer: Address: Treasurer: Address: Secretary: Address: Treasurer: Address: Trea	Troy MI 48083			
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President: Anthony Falzone  Address: 2899 E. Big Beaver Road, #120  Troy, MI 48083  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  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	Address:			
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	The officer or director signing this document (and who is listed in number 12 are true and that he or she is aware that false information submitted in a docum a third degree felony as provided for in s.817.155, F.S.			
14. Anthony Falzone / Presiden + Director  (Typed or printed name and capacity of person signing application)	14. Anthony Falzone / President/Director  (Typed or printed name and canacity of person signing	annlication)		

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



# Office of the Secretary of State

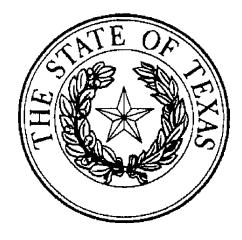
### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Applied Resources, Inc. (file number 801661194), a Domestic For-Profit Corporation, was filed in this office on September 27, 2012.

It is further certified that the entity status in Texas is in existence.

13 JAN 14 PM 3: 57

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 12, 2012.





John Steen Secretary of State