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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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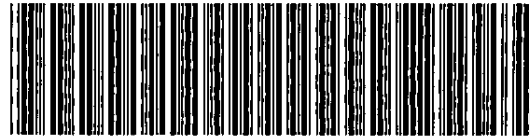
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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9/3/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Excell Personnel Services Corporation

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:

Brian Williams

Name of Person

Global Employment Solutions, Inc.

Firm/Company

10375 Park Meadows Dr Suite 475

Address

Lone Tree, CO 80124

City/State and Zip code

bwilliams@gesnetwork.com

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

For further information concerning this matter, please call:

Brian Williams

Name of Person

at (303) 200-1547

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

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TALLAHASSEE, FLORIDA

**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. **Excell Personnel Services Corporation**

(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. **Illinois**

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

3. **36-3492005**

(FEI number, if applicable)

4. **1/7/1987**

(Date of incorporation)

5. **perpetual**

(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)

7. **10375 Park Meadows Dr Suite 475 Lone Tree, CO 80124**

(Principal office address)

10375 Park Meadows Dr Suite 475 Lone Tree, CO 80124

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Corporation Service Company**

Office Address: **1201 Hays Street**

Tallahassee

(City)

, Florida **32301**

(Zip code)

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9. 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.



(Registered agent's signature)

Tracy Manganelli
Assistant VP

10. 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.

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

A. DIRECTORS

Chairman: Howard Brill

Address: 10375 Park Meadows Dr Suite 475
Lone Tree, CO 80124

Vice Chairman: _____

Address: _____

Director: Wayne Cavanaugh

Address: 10375 Park Meadows Dr Suite 475
Lone Tree, CO 80124

Director: Vladimir M Gufin

Address: 10375 Park Meadows Dr Suite 475
Lone Tree, CO 80124

B. OFFICERS

President: Howard Brill

Address: 10375 Park Meadows Dr Suite 475
Lone Tree, CO 80124

Vice President: _____

Address: _____


Secretary: Samuel L Katz

Address: 10375 Park Meadows Dr Suite 475 Lone Tree, CO 80124

Treasurer: _____

Address: _____

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

12.  _____
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 a third degree felony as provided for in s.817.155, F.S.

13. Wayne Cavanaugh COO/CFO Director

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

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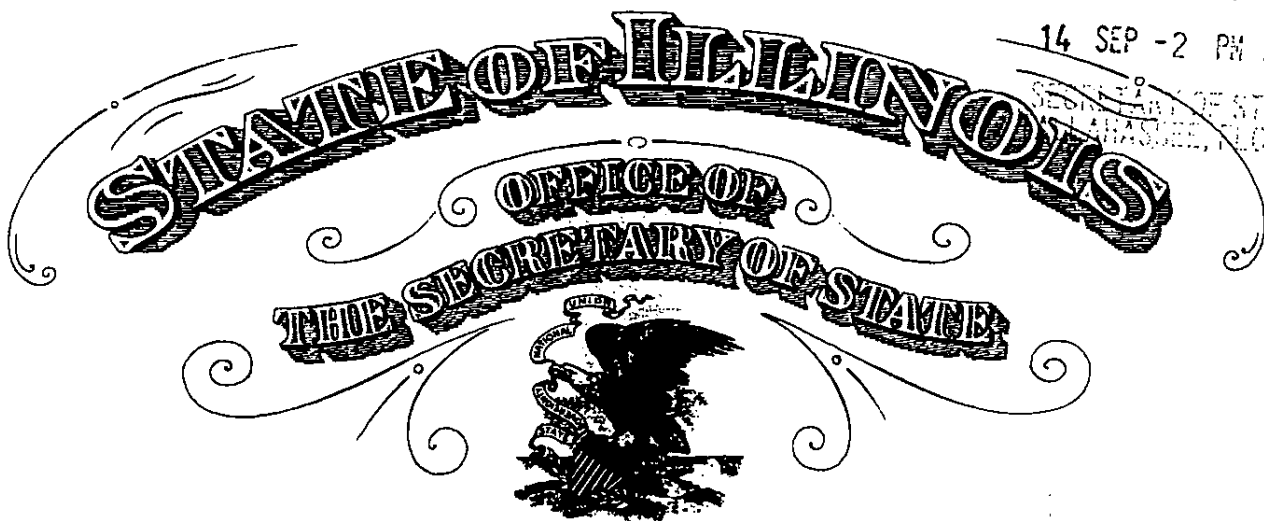
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

File Number 5450-972-3

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To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

EXCELL PERSONNEL SERVICES CORPORATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 07, 1987, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of AUGUST A.D. 2014 .

Jesse White

Authentication #: 1423401592

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE