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JUL 0 1 2021 M. SOLOMON

COVER LETTER

	gistration Section vision of Corporations				
SUBJECT	Workforce Strategies, Inc.				
Name of corporation - must include suffix					
Dear Sir or	Madam:				
"Certificate	ed "Application by Foreign Corporation for Authorization to Transact Business in Florida," of Existence," or "Certificate of Good Standing" and check are submitted to register the enced foreign corporation to transact business in Florida.				
Please retur	m all correspondence concerning this matter to the following:				
Adele Beam					
	Name of Person				
Kreis Ender	le Hudgins & Borsos PC				
	Firm/Company				
PO Box 401	0				
	Address				
Kalamazoo.	MI 49003-4010				
	City/State and Zip code				
shoffman@v	wsitalent.com				
	E-mail address: (to be used for future annual report notification)				
For further	information concerning this matter, please call:				
Adele Beam	at ()				
Na	me of Person Area Code Daytime Telephone Number				
Reg Div The 241	REET/COURIER ADDRESS: gistration Section Registration Section Division of Corporations Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32303 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
	a check for the following amount: check payable to: FLORIDA DEPARTMENT OF STATE				

☐ \$87.50 Filing Fee,

□ \$70.00 Filing Fee □ \$78.75 Filing Fee & ■ \$78.75 Filing Fee &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

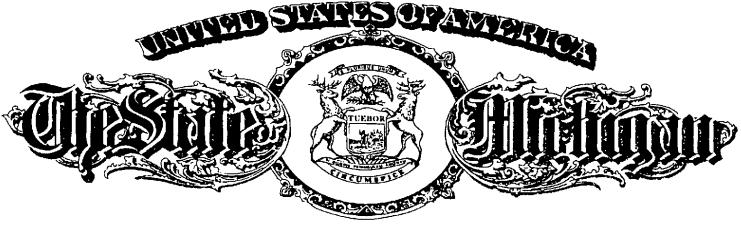
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

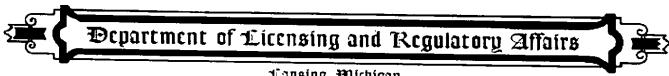
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	-	
Michigan 3		38-3575056		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
January 18, 2001		perpetual		
(Date of incorporation) 5.		(Date of duration, if other than perpetual)		
upon qualificatio	on .			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	r Florida, if prior to registration) 602, F.S., to determine penalty liability)	-	
, 3497 South 9th St	reet, Kalamazoo, MI 49009			
	(Principal offi	ce <u>street</u> address)	-	
	(Current maili:	g address, if different)	<u>-</u>	
Name and atroo			1	
3. Name and stree	<u>t address</u> of Florida registered agent: (P.C		13/41 14 CO	
3. Name and <u>stree</u> Name:				
	<u>t address</u> of Florida registered agent: (P.C		7. B. S.	
Name:	t address of Florida registered agent: (P.C CT Corporation System	D. Box NOT acceptable)		
Name:	Laddress of Florida registered agent: (P.C CT Corporation System 1200 South Pine Island Road		76 E 6 5 5 14	

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS			
□Chairman	Name:	□Chairman	Name: Steve Beebe
□Vice Chairman	Address: 3497 South 9th Street	□Vice Chairman	3497 South 9th Street
Director	Kalamazoo, MI 49009	□Director	Kalamazoo, MI 49009
President		□President	
□Vice President		■ Vice President	
■ Secretary	Treasurer	□Secretary	□Treasurer
Other CEO	Other	□Other	Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
■ Director	Kalamazoo, MI 49009	Director	
President		□President	
☐ Secretary		□Vice President	2121
-	□Treasurer	□Secretary _	□Treasurer: ⊆
□Other	Other	□Other	
			Name:
□Chairman	Name:	□ Chairman	Same:
	Address:	□Vice Chairman	Address:
☐ Director		□Director	
□President		President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
Other		□Other	
The officer or direc she is aware that falls.817.155, F.S.	Use an attachment to report more than Six (6). The atta added to the index when filing your Florida Department of Director of Signature of Director of the signing this document (and who is listed in number information submitted in a document to the Depart Brien, President	or Officer	pat the facts stated herein are true and that he or
13. <u>Jenrey C. Or</u>	Drien, Fresident		





Lansing, Michigan

This is to Certify That

WORKFORCE STRATEGIES, INC.

was validly incorporated on January 18, 2001 as a Michigan DOMESTIC PROFIT CORPORATION, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

STERNE AND REGULATORY Grannes & Commercial

Sent by electronic transmission

Certificate Number: 21060605802

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 25th day of June, 2021.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau