# 500000 LETER 2

Qualification/Tax Lien Section 600001600476 -10/05/95--01001--020 \*\*\*\*\*\*70.80 \*\*\*\*\*\*70.08 Division of Corporations SUBJECT: <u>GRAFTON</u> 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", 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: Should you need to call someone concerning this matter, please call:

#### **COURIER ADDRESS:**

TO:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

#### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 5, 1995

CAROL J. CARROLL GRAFTON, INC. 6800 COLLEGE BLVD., STE 235 OVERLAND PARK, KS 66211

SUBJECT: GRAFTON, INC. Ref. Number: W95000019830

We have received your document for GRAFTON, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You may not use this form to file a "d/b/a" name. Please remove the words "DBA GRAFTON STAFFING COMPANIES" from line 1. If you wish to do business in Florida under a name other than the corporate name, you must file a Fictitious Name application. One has been sent to you today under separate cover.

Please list the current mailing address in the two lines provided in section 7. Please also list the nature of business in line 8.

The document must include original signatures.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers
Document Examiner

Letter Number: 995A00045205

## 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. CRAFTON Inc.  (Name of corporation: must include the word "INCORPORATED" abbreviations of like import in language as will clearly indicate that person or partnership if not so contained in the name at present.)	, "COMPANY", "CORPORATION" or words or it is a corporation instead of a natural
, , , , , , , , , , , , , , , , , , , ,	
2. MISSOURI (State or country under the law of which it is incorporated)  3.	47 - 1506/1/ (FEI number, if applicable)
• • • • • • • • • • • • • • • • • • • •	(FEI number, if applicable)
4. JAN. 17 1989 5. (Date of Incorporation)	ation: Year corp. will cease to exist or "perpetual")
6. November 1995 (Date first transacted business in Florida. (SEE SECTIONS 607.1)	and real corp. Will cease to exist or "perpenal")
(Date first transacted business in Florida, (SEE SECTIONS 607.13	301, 607.1502, AND 817.155, F.S.)
7. 600 Broadway Ste 250	8: 27
Kansas City mo 64105 (Current mailing addre	
(Current mailing addre	ss)
8. Temporary Staffing Ser (Purpose(s) of corporation authorized in home state or country to be a Florida)	vices - general business carried out in the state of
9. Name and street address of Florida registered agent acceptable)	
Name: CAROL J. CARROLL	
Office Address: 5300 Cypress ST. #	-165
TampA,	Florida, 33609
10. Registered agent's acceptance:	(Zip Code)
Having been named as registered agent and to accept serve corporation at the place designated in this application, I have registered agent and agree to act in this capacity. I further all statutes relative to the proper and complete performance and accept the obligations of my position as registered age	ereby accept the appointment as ragree to comply with the provisions of see of my duties, and I am familiar with ent.
(Registered agent's signat	
11. Attached is a certificate of existence duly authenticated delivery of this application to the Department of State, I official having custody of corporate records in the jurisc incorporated.	31/ the Sacratom: of Ciasa ==L ==

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)
A. DIRECTORS (Street address only- P. O . Box NOT acceptable)
Chairman: CAROL J. CARROLL
Address: 5300 W. Cypress St. #16 - TAMPA, FL 33609
Vice Chairman: Richard T. CARROLL
Address: 5300 W. Cypress St., #165, TAMPA. FL 33609
Director:
Address:
Director:
Address:
B. OFFICERS (Street address only- P. O. Box NOT acceptable)
President: CAROLL J. CARROLL
Address: 5300 W. Cypres DS+ #165
Tampa FL : 33409
Vice President: Richard CARDLL
Address: Same as above
Secretary: Carou 3 Carrou
Address: Same As abone
Treasurer: Richard 3 Carroll
Address: same as above
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Carel Caull and Mall (Signature of Chairman, or any officer listed in number 12 of the application)
14. CAROL J CARROLL (Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



### Rebecca McDowell Cook Secretary of State

CORPORATION DIVISION
CERTIFICATE OF CORPORATE GOOD STANDING

95 0CT 26 AM 0: 27

I, REBECCA McDOWELL COOK, SECRETARY OF STATE OF THE STATE OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICE AND IN MY CARE AND CUSTODY REVEAL THAT GRAFTON, INC.

WAS INCORPORATED UNDER THE LAWS OF THIS STATE ON THE 17TH DAY OF JANUARY, 1989, AND IS IN GOOD STANDING, HAVING FULLY COMPLIED WITH ALL REQUIREMENTS OF THIS OFFICE.

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE SREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 18TH DAY OF SEPTEMBER, 1995.



