F98000000839

Qualification/Tax Lien Section TO: Division of Corporations nnnn02428310---3 ****236.25 *****78.75 SUBJECT: Productivity Partners Franchising, 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: Amy L. Freeland (Name of Person) Productivity Partners, Inc. (Firm/Company) 9600 West Sample Road, Suite 404 Coral Springs, Florida 33065 (City/State/Zip) Should you need to call someone concerning this matter, please call: Freeland (Area Code & Daytime Telephone Number) (Name of Person)

COURIER ADDRESS:

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



THE RIGHT PEOPLE AT THE RIGHT TIME

9600 West Sample Road Suite 404

Coral Springs, FL 33065-4036 Phone: 954-344-8355 • Fax: 954-344-7934

February 10, 1998

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

RE: Authorities to Do Business

To Whom It May Concern:

Attached please find a check in the amount of \$236.25 which represents payment for the following:

\$70.00 registration fee \$ 8.75 certificate of status fee

This is for the following corporations:

Efficiency, Inc.

Productivity Partners International, Inc.

Productivity Partners Franchising, Inc.

Please call me if you have any questions.

Sincerely.

Office Manager

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:

| sing, Inc. | de or | |
|--|---|--|
| ordicate that it is a corporation instead of a natural present.) | us OI | |
| 3 65-0782588 | | |
| (FEI number, if applicable) | | |
| 5.perpetual | | |
| (Duration: Year corp. will cease to exist or "perp | retual") |) |
| | | |
| ONS 607.1501, 607.1502, AND 817.155, F.S.) | | |
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| ailing address) | ~ | 3 |
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| ncies | ** | - 22.5 - 25.5 |
| untry to be carried out in the state of | 27 | DIVISION OF CORPORATIONS |
| red agent: (P.O. Box or Mail Drop Box NO | <u>T</u> | |
| nns | | |
| Road, Suite 404 | | |
| , Florida, 33065 | | |
| (Zip Code) | | |
| ccept service of process for the above stated cation, I hereby accept the appointment as I further agree to comply with the provision | ons of | |
| | ORATED", "COMPANY", "CORPORATION" or word dicate that it is a corporation instead of a natural present.) 3. 65-0782588 | ORATED", "COMPANY", "CORPORATION" or words or dicate that it is a corporation instead of a natural present.) 3. 65-0782588 (FEI number, if applicable) 5. per petual (Duration: Year corp. will cease to exist or "perpetual") ONS 607.1501, 607.1502, AND 817.155, F.S.) O4 98 atting address) accies untry to be carried out in the state of red agent: (P.O. Box or Mail Drop Box NOT) ans Road, Suite 404 , Florida, 33065 (Zip Code) |

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.

12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable)

| A. DIREC | CTORS (Street address only- P. O . Box NOT acceptable) | |
|--------------|--|--------|
| Chairman: _ | Richard F. Hermanns | |
| Address: | 9600 W. Sample Road, Suite 404, Coral Springs, FL 330 | 065 |
| Vice Chairm | nan: Louis S. Soscia | |
| | 9600 West Sample Road, Suite 404, Coral Springs, FL | 330 |
| Director: _ | | |
| Address: | | |
| Director: | | |
| Address: | | |
| B. OFFICE | ERS (Street address only- P. O. Box NOT acceptable) | |
| President: | Richard F. Hermanns | |
| Address: | 9600 West Sample Road, Suite 404 | |
| | Coral Springs, FL 33065 | |
| Vice Preside | nt: | IVIS |
| | nt: | ON C |
| **** | N | FACO |
| Secretary: _ | | RPOF S |
| | 27 | ATE |
| - | | 7 |
| Treasurer: _ | | |
| | | |
| 13. (Sign | ecessary, you may attach an addendum to the application listing additional directors. The proof chairman, vice chairman, or any officer listed in number 12 of the application) and F. Hermanns, President, Chairman | |

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

State of Delaware

Office of the Secretary of State PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRODUCTIVITY PARTNERS FRANCHISING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF FEBRUARY, A.D. 1998.

DIVISION OF CORPORATIONS

98 FEB 12 AM 11: 28



Edward J. Freel, Secretary of State

81 8300 AUTHENTICATION:

8902977

DATE:

02-04-98

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