# F9800001242

P.O Box 20802, Tampa, FL. 33622 Tel: (813) 421-2465 Fax: (888) 4 JOBS 97

Lee Rivers Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines Street Tallahassee FL 32399 800002448458--8 k -03/05/98--01002--019 \*\*\*\*\*78.75 \*\*\*\*\*78.75 x

3<sup>rd</sup> March 1998

### Dear Lee

Please find enclosed completed 'Application by Foreign Corporation for Authorization to Transact Business in Florida' form. Also enclosed is the certificate of good standing and check for \$78.75 to include a FL certificate of status.

You have been most helpful in our telephone conversations, for which I thank you very much.

Yours faithfully

Claire Murray

Enc: FEDEX pre-paid return airway bill.

## TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: PEOPLECORP 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:		
CLAIRE MURRAY (Name of Person)		
PEOPLECORP INC. (Firm/Company)		
7877 CHAUCER DRIVE		
SPRING HILL FL 34607 (City/State/Zip)		
Should you need to call someone concerning this matter, please call:		
CLAIRE MURRAY  at (813 ) 421 – 2465.  (Name of Person) (Area Code & Daytime Telephone Number)		
COURIER ADDRESS: MAILING ADDRESS:		
Qualification/Tax Lien Sec.Qualification/Tax Lien SectionDivision of CorporationsDivision of Corporations409 E. Gaines StP. O. Box 6327Tallahassee, FL 32399Tallahassee, FL 32314		

# 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.	PEOPLE CORP INC.
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2.	(State or country under the law of which it is incorporated)  3. 59-3493219  (FEI number, if applicable)
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(Date of Incorporation)  5. PERPETUAL  (Duration: Year corp. will cease to exist or
	(Date of incorporation) (Diffation: Teal corp. will cease to exist of "perpetual")
6.	(Date first transacted business in Florida. (See Sections 607.1501, 607.1502, AND 817.155, F.S.)
7.	P.O. BOX 20802
	TAMPA FL 33622 (Current mailing address)
	(Current mailing address)
8.	RECRUITING & PLACEMENT EMALOYMENT AGENCY (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
	Name: CLAIRE MURRAY SE
	Office Address: 7877 CHAUCER DRIVE
	Office Address: 4844 CHACCER DRIVE  SPRING HILL , Florida , 34607 SCORD (Zip Code)  Registered agent's acceptance:
10	(Zip Code) = S∞ ∴ Registered agent's acceptance: ∴ ≥S
re al	aving been named as registered agent and to accept service of process for the above states; arporation at the place designated in this application, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of I statutes relative to the proper and complete performance of my duties, and I am familiar with ad accept the obligations of my position as registered agent.
	(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.

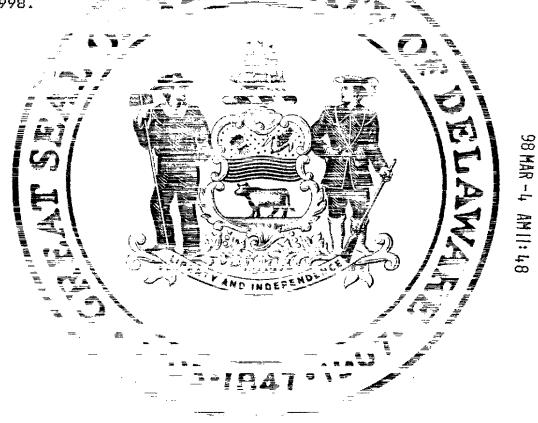
12. Names and addresses of officers and/or directors: (Street address ONLY-P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: Address: Vice Chairman: Address: \_ Director: Address: Director: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: CLAIRE MURRAY CHAUCER DRIVE Address: \_\_\_\_ SPRING HILL FL 34607 Vice President: Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) CLAIRE MURRAY - PRESIDENT.

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

# State of Delaware

# Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PEOPLECORP 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 SECOND DAY OF MARCH, A.D. 1998.



Edward J. Freel, Secretary of State 8948394

**AUTHENTICATION:** 

03-02-98

2859914 8300

981080106

DATE: