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Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000002: Phone : (850)222-10:2 Fax Number : (850)878-53:8 SECRETARY OF STATES
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: MANPOWER PROFESSIONAL SE	RVICES, INC.
iioci	UMENT NUMBER: F98000007145	or Corbonation
	nclosed Amendment and fee are subm	-
Please	e return all correspondence concerning	this matter to the following:
	Name of Contact Person	· · · · · · · · · · · · · · · · · · ·
	Firm/Company	
	Address	
-	City/State and Zip Code	
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For fu	urther information concerning this mat	ter, please call:
		ut ()
	Name of Contact Person	at (
Enclo	sed is a check for the following amoun	
	\$35.00 Filing Fee	\$43.75 Filing Fee & S\$2.50 Filing Fee, Certified C:py (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
	ng Address:	Street Address:
	dment Section on of Corporations	Amendment Section Division of Corporations
P.O. E	Box 6327	Clifton Building
Tallah	iassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

	P98000007145					
	(Document num	ber of corporati	on (i: known)			
1.	MANPOWER PRO	FESSIONAL S	ERVICES, INC.	١		
	(Name of corporation as it appe					
				1 200		
2.	Wisconsin	3.	12/31/1998	11 JUL 19 PM		
	(Incorporated under laws of)		(I)ate authorized to do business in Florida			
				(a)		
				PM 3:		
		ECTION II		35 9		
	(4-7 COMPLETE ON	LY THE APPLI	CABLE CHANGES)	بب		
4 70.1.		45	and the second and an decide laws	. . 59		
	mendment changes the name of the corpora	ation, when w	as the change effected under the laws	DI		
its juris	diction of incorporation? 07/15/2011					
5. Experis	US Inc					
(Name	of corporation after the amendment, addin	g suffix "com	oration." "company," or "incorporated	d." or		
approj	priate abbreviation, if not contained in new	name of the	corpc::ation)			
(If new	name is unavailable in Florida, enter altern	ate comorate	name adopted for the purpose of trans	acting		
	ss in Florida)	was sorperane	man, weep in a gor and provide a many			
6. If the ar	mendment changes the period of duration,	indicate new	period of duration.			
	(New duration)				
7. If the at	mendment changes the jurisdiction of inco	rporation, ind	icate new jurisdiction.			
	-					
	(N	ew jurisdiction)				
8. Attache	ed is a certificate or document of similar in	port, evidenc	ing the amendment, authenticated not	more than		
90 days	ed is a certificate or document of similar in prior to delivery of the application to the l custody of corporate records in the jurisdic	Department o	f State, by the Secretary of State or oth	er official		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	don didei di	e laws of winch it is incorporated.			
	Domant Jones					
(;	Signature of a director, president or other officer - i	f in the hands				
•	Samantha Jones		The new two			
	(Typed or printed name of person signing)		Vice President (Title of person signing)			
			*			

TEMPLATE 2-2000

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Secretary, Department of Financial Institutions, do hereby certify that an Amendment was filed with this department effective July 15, 2011, changing the name of MANPOWER PROFESSIONAL SERVICES, INC. to the present name of EXPERIS US, INC.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on July 14, 2011.

RAY ALLEN, Deputy Secretary Department of Financial Institutions

BY: Datel She

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.