## TO: Qualification/Tax Lien Section Division of Corporations

SUBJECT: Express Manpower 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: 2000028735825							
-05/13/9901049004 Karen M. Rhodes *****87.50 *****87.50							
(Name of Person)							
Express Manpower Inc.							
(Firm/Company)							
P.O. Box 2966							
(Address)							
Houma, LA 70361							
· (City/State/Zip)							
Should you need to call someone concerning this matter, please call:							
Karen Rhodes at (504 ) 879-4008							
(Name of Person) (Area Code & Daytime Telephone Number)							
STREET ADDRESS:  MAILING ADDRESS:							
Qualification/Tax Lien Section  Qualification/Tax Lien Section  Division of Corporations  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32399  Tallahassee, FL 32314							
Enclosed is a check for the following amount:							
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,  Certificate of Status Certified Copy Certified Copy  Certified Copy							

## 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	Express Manpower Inc.						
	words or abbrevi	ations of like import in language as will	DRATED", "COMPANY", "CORPORATION" or clearly indicate that it is a corporation instead of a	. <b>1</b>			
	natural person or	partnership if not so contained in the na	tine at present.)				
2.			3. 72–1333935				
	(State or country	under the law of which it is incorporated	i) (FEI number, if applicable)				
4	09	/16/96 5.	Perpetual				
•	(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")				
6	May 10	<b>,</b> 1999	· · · ·				
٧.	(Date first	transacted business in Florida.) (SEE SE	ECTIONS 607.1501, 607.1502 and 817.155, F.S.)	er i Marie			
7.	P.O. B	ox 2966					
	Houma,	LA 70361		<u>-</u>			
		(Current mailing	g address)	<b>3</b>			
8.	Contractor - Furnishing Labor Only						
	(Purpose(	s) of corporation authorized in home stat	te or country to be carried out in state of Florida)				
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)							
	N.T.	Hanoch Talmor	Street Property of the street	<u>.</u>			
	Name:		70	-			
Office Address:		4400 NW 23rd Ave. Sui	<u>te B</u> 32				
Gainesville, Florida, 32606							
			(Zip code)				
•	0.0						
1	U. Kegistered a	igent's acceptance:					
tl H	his application, I with the provisions	hereby accept the appointment as regists of all statutes relative to the proper an my position as registered agent.	vice of process for the above stated corporation at the place designated tered agent and agree to act in this capacity. I further agree to comply a complete performance of my duties, and I am familiar with and acce				
	(Registered agent's signature)						

which it is incorporated.

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

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

	ORS (Street address only - P.O. Box NOT acceptable)		
Chairman:	'Karen M. Rhodes		
Address:	212 Brinwood Drive		والأستان
	Houma, LA 70360		
Vice Chairma	an:		
	and the second s		
Address	•		
Director:	Nolan Prejeant	AND THE COLUMN SECTION OF THE SECTIO	
· · · · · · · · · · · · · · · · · · ·	440 Main Project Road		Sept.
	Schriever, LA 70359		
Director:			********
		Control of the contro	
			Ţ
в. OffiC	CERS (Street address only - P.O. Box NOT acceptable)		
President: _	Karen M. Rhodes	99	
	212 Brinwood Drive		 
	Houma, LA 70360	70 V	
Vice Preside	eni: Nolan Prejeant  440 Main Project Road	里台	* * * 7
Address:	440 Main Project Road	3	
	Schriever, LA 70359		-
Secretary:	Varon M. Dhodos		. <u>.</u>
Address:	212 Brinwood Drive		
_	Houma T.A 70360		=
Treasurer:	Karen M. Rhodes		
Address: _	212 Brinwood Drive	POLIZANIE I W LANGE LA COMPANIO POLIZANIE A COMPANIO POLIZANIE POLIZA	ಎ ಪ.ಚೌಕ ಪ_ ಉಚಿಕಾರ್.
	Houma, LA 70360	THE	. <b>T</b> E. ,
NOTE: I	If necessary, you may attach an addendum to the application listing additional officers a	and/or directors.	
13	Karen M. Khodes	ne amplication)	ç. 9
	(Signature of Chairman, Vice Chairman, o) any officer listed in number 12 of the	_	
14	Karen M. Rhodes - President  (Typed or printed name and capacity of person signing applications)	alion)	·- <u>-</u>



SECRETARY OF STATE

As Secretary of State. of the State of Louisiana, I do hereby Certify that

EXPRESS MANPOWER, INC.

A LOUISIANA corporation domiciled at HOUMA,

Filed charter and qualified to do business in this State on November 13, 1990,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Balon Rouge on,

May 1999 Then

CAS 34367442D \_\_\_\_\_\_ Secretary of State

