Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: NATIONAL CORPORATE RESEARCH, LTD. Account Name

Account Number : I20000000088 : (800)221-0102 Phone

Fax Number : (212)564-6083

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Hire Ed Solutions, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$125.00

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Corporate Filing NAMPTON

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AUG 3 1 2009

EXAMINER

8/27/2009

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	Hire Ed Solutions, I	LLC		
**	(Name of Poreign Limited Liability Company: must include	e "Limited Liability Company," "L.L.C.," or "L.L.C.")		
45.0		T		
оопяся	it of the managers or managing members adopting the altern	of transacting business in Florida and attach a copy of the writ tate name. The alternate name must include "Limited Liability	teri	
Compa	any," "L.L.C.," "LLC.") Delaware			
2	3	(FEI number, if applicable)		
(Juri com	isdiction under the law of which foreign limited liability pany is organized)	(FEI number, if applicable)		
4	8/27/09 s.	Perpetual		
	(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpental")		
6	Upon qualitication (Date first transacted business in Florid			
	(See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)		
7.				
·	9309 N. Florida Avenue,	Tampa, FL 33612		
	(Street Address of	Principal Office)		
8. If I	imited liability company is a manager-managed or	empany, check here		
9. The	e name and usual business addresses of the manag	ing members or managers are as follows:		
	· ····································	me morne or managers are as removed.		
	 	The state of the s		
	Conversion Partners, LI	LC, 30 Irving		
	Place, 2nd Floor, NY,	NY 10003		
		arronde familitärikaite. Tiiti kommuniaarronissa 1860 Millionariaaitavilisitä kaputus purus jar apilappaalain kulmu		
10. Atz	ached is an original certificate of existence, no more than 90 day	sold, duly authenticated by the official having custody of records i	11	
	diction under the law of which it is organized. (A photocopy is on of the certificate under oath of the translator must be submitte			
11. Na	ature of business or purposes to be conducted or pr	romoted in Florida: To operate a job placen	nent	
busine	ss or any other business that may be law	vfully operated in Florida		
	<i></i>		O i	
	Signature of a member or an autho (in accordance with section 608.408(3), F.S., an affirmation under the penulties of persure	the execution of this document constitutes	Ĵ9 AUG 2:	
	Dávid C. Denov		2	5

Typed or printed name of signee

(((H090001909143)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Compan	iy is:			
Hire Ed	Solutions, LLC			
If name unavailable, the alternate name to be	used in the state	of Florida is:		
2. The name and the Florida street address of	the registered a	igent and office are:		
National Corpo	orate Research,	Ltd., Inc.		
	(Name)			
515 Ea	ast Park Avenue)		
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Tailahassee	FL	32301		
	City/State/Zip			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Vitablindaglist Assist Sect.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "HIRE ED SOLUTIONS, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF AUGUST, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HIRE ED SOLUTIONS, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF AUGUST, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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090813411

You may verify this cortificate online at corp.delaware.gov/authwor.shtml

AUTHENTY CATION: 7497869

DATE: 08-27-09