

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INC. PLAN (USA)
Account Number : I20100000017
Phone : (302)428-1200
Fax Number : (302)428-1274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

cquigley@incplan.net

Foreign Limited Liability Company MANPOWER SERVICES LLC

RECEIVED
OF MAR 18 AM 6: 25
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Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

S. HAWKES

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EXAMINER

S. HAWKES

Electronic Filing Menu

Corporate Filing Menu

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EXAMINER

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COVER LETTER

TO:	Registration Section Division of Corporation	ons				
SUBJE	· CT:	MAN POWER SERI	IKG5 LLC			
			mited Liability Company			
The end Existen	closed "Application by F ace, and check are submi	Foreign Limited Liability Co (tted to register the above ref	mpany for Authorization to Terenced foreign limited liabil	ransact Business in Florida," Certificate of ity company to transact business in Florida		
Please	return all correspondenc	e concerning this matter to t	he following:			
		Ca	roline Quigley			
			lame of Person			
		Inc	. Plan (USA)			
			irm/Company			
	•					
		20C	Trolley Square .			
			Address			
		Wilmin	igton, DE 19806			
			State and Zip Code			
		Chyn	state and zip code			
	cquigley@ incplan.net					
	•	E-mail address: (to be use	ed for future annual report no	tification)		
For furt	her information concern	ing this matter, please call:	,			
		line Quigley	at (302)	428-1200		
	Nam	e of Person Ar	ea Code & Daytime Telephor	ne Number		
	MAILING ADDRESS	<u>s:</u> <u>stre</u>	ET ADDRESS:			
	Division of Corporatio	ns Divisi	on of Corporations			
	Registration Section		ration Section			
	P.O. Box 6327 Tallahassee, FL 32314		n Building Executive Center Circle			
	Tananassee, FE 32314		assee, FL 32301			
Enclos	ed is a check for the	following amount:				
1	\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy		
		///21100000				

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WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or M	lanaging
Members of Manpower Services LLC	Els.
(Name of Limited Liability Company)	圣公
a limited liability company duly organized and existing under the laws of	SSES
Delaware	7
(State or Country of Organization)	``
Because the name of this foreign limited liability company does not satisfy	the the
requirements of the s. 608.406, F.S., the limited liability company hereby	adopts the
following name to transact business in the state of Florida:	
Manpower Services & Solutions LLC	
(Name to be used by limited fiability company in Florida. NOTE: Name must end with Limited Lie Company, L.L.C., or LLC.)	ability
Date: 3/18/2010	
Signature(s) of Manager(s) and/or Managing Member(s):	
Neil M. Pherson menher	

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

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	V
1. MANPOWER SERVICES LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "ESC.")	
	2
transacting business in Florida as Manpower Services & Solutions LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited cability Company," "L.L.C," "LLC.")	•
2. Delaware 3. (FEI number, if applicable)	
company is organized)	
4. 03/08/2010 5. perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
·	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 19C Trolley Square	
14(1) 1	
Wilmington, DE 19806 (Street Address of Principal Office)	
(offeet Mulicos of Millerpar Office)	
B. If limited liability company is a manager-managed company, check here	
The name and usual business addresses of the managing members or managers are as follows:	
Neil Mcpherson	
· · · · · · · · · · · · · · · · · · ·	
Neil Mcpherson	
Neil Mcpherson 19C Trolley Square	
Neil Mcpherson 19C Trolley Square Wilmington, DE 19806 0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in rejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	
Neil Mcpherson 19C Trolley Square Wilmington, DE 19806 0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in rejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)	
Neil Mcpherson 19C Trolley Square Wilmington, DE 19806 0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in rejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under eath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida:Employment and	
Neil Mcpherson 19C Trolley Square Wilmington, DE 19806 0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in rejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under eath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida:Employment and	
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Neil Mcpherson 19C Trolley Square Wilmington, DE 19806 0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in acjurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: Employment and payroll services Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	

INC. PLAN (USA)

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CERTIFICATE OF DESIGNATION OF, REGISTERED AGENT/REGISTERED OPFI

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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 Company is:
Manpower Services LLC
If unavailable, the alternate to be used in the state of Florida is:
Manpower Services & Solutions LLC
2. The name and the Florida street address of the registered agent and office are:
Marc H. Launer
(Name)
333 Las Olas Way, Suite 2902
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Ft. Lauderdale FL 33301
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. Marc H. Level (Singular)

\$ 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 "MANPOWER SERVICES 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 EIGHTH DAY OF MARCH, A.D. 2010.

10 MAR 18 PM 12: 21

10 MAR 18 PM 12: 21

SEURE LARRY OF STATE
TALLAHASSEE, FLORIDA

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100256359

AUTHENT CATION: 7855240

DATE: 03-08-10

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