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T. CLINE

FEB - 7 2011

EXAMINER

COVÉR LETTER

.TO:

		Dlutions, LLC Name of Limited Liability Company			
		Liability Company for Authorization to Transact Business in a bove referenced foreign limited liability company to tran			
Please return al	I correspondence concerning this	matter to the following:			
	Tracy Byrd Jamison				
		Name of Person			
	Global Workplace Solu	tions, LLC			
		Firm/Company			
	9823 Cincinnati-Dayto	on Road			
	•	Address			
	West Chester, Oh 450	69			
		City/State and Zip Code			
	tjamison@planesco		(1) (2) (1) (2) (1) (2)		£
	E-mail addres	s: (to be used for future annual report notification)		£3.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
For further info	ormation concerning this matter, p	please call:		<u>-</u>	ه به به وي ان المصد علايان
Trac	y Jamison	at (513) 759-6000	THE THE	-	g all a
/	Name of Person	Area Code & Daytime Telephone Number	1000	5:5	*1,
Divisi	ING ADDRESS: on of Corporations	STREET ADDRESS: Division of Corporations	7	a n	,
	ration Section Sox 6327	Registration Section Clifton Building			
	assee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2011

TRACY BYRD JAMISON 9823 CINCINNATI-DAYTON ROAD WEST CHESTER, OH 45069

SUBJECT: GLOBAL WORKPLACE SOLUTIONS, LLC

Ref. Number: W11000004558

We have received your document for GLOBAL WORKPLACE SOLUTIONS, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent ofthe managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

The document number of the name conflict is P11000006548.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 011A00002060

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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	d/or Managing
Members of Global Workplace Solutions, LLC	
(Name of Limited Liability Company)	
limited liability company duly organized and existing under the la-	ws of
Ohio	
(State or Country of Organization)	
Because the name of this foreign limited liability company does not	satisfy the
equirements of the s. 608.406, F.S., the limited liability company he	ereby adopts the
following name to transact business in the state of Florida:	
GWS Solutions, LLC	·
Name to be used by limited liability company in Florida. NOTE: Name must end with Licompany, L.L.C., or LLC.)	mited Liability
Date: 1/2/2011	20 H
Signature(s) of Manager(s) and/or Managing Member(s):	
John J. Planes	A A A
ohn J. Planes	二
	S S
	\$30 FT

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

GWS Solutions, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited"	
Company," "L.L.C," "LLC.")	Liaomiy
2. Ohio (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-3059005 (FEI number, if applicable)	
4. 5/25/2005 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cea exist or "perpetual")	se to
6. 12/1/2010	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 9823 Cincinnati-Dayton Road, West Chester, OH 45069	<u></u>
9-r (2 1 1 1 1 1 1 1 1 1	<u></u>
(Street Address of Principal Office)	33
8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or managers are as follows:	وي ا
John J. Planes, 9823 Cincinnati-Dayton Road, West Chester, OH 45069	<u>က</u> မာ
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language translation of the certificate under oath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida: work place service	<u>s</u>
John a. Planer	• .
Signature of a member or an authorized representative of a member.	

penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

John J. Planes

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 Company is:	
Global Workplace Solutions, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Beth Etheridge	
(Name)	
1066 SW Estaugh Avenue	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	- ~
Port St. Lucie FL 34953 City/State/Zip	
Chy/State/Zip	ESSE F
Having been named as registered agent and to accept service of process for the above staliability company at the place designated in this certificate, I hereby accept the appointm agent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with ana obligations of my position as registered agent as provided for in Chapter 608, Florida Sta	ent as registered all statutes d accept the
Beth Theidal (Signature)	
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	

United States of America State of Ohio Office of the Secretary of State

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show GLOBAL WORKPLACE SOLUTIONS, LLC, an Ohio Limited Liability Company, Registration Number 1545477, was organized within the State of Ohio on May 25, 2005, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 18th day of January, A.D. 2011

Ohio Secretary of State

Validation Number: V201118JDFEC3