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To:

Division of Corporations

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: (850)617-6383

From:

: NRAI CORPORATE SERVICES, INC. Account Name

Account Number : I20080000023 Phone (651)225-9500 : (651)225-9579

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

Email Address:

Foreign Limited Liability Company SWBC Professional Employer Services I, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

J. SAULSBERRY **EXAMINER** 

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MAY 16 2011

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

	' COMPLIANCE WITH SECTION 608.503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REG MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	ISTER A I	OREKIN
1	SWBC Professional Employer Services I, LLC		
٠,	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "I	.LC.")	_
ÇQ.	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a neent of the managers or managing members adopting the alternate name. The alternate name must include "Lb ompany," "L.L.C," "LLC.")	copy of th mited Liab	_ в written pility
2.,	Texas  (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)		_
	(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)		
4.	10/15/2010 5. Perpetual (Date of Organization) (Duration: Year limited liability company w		_
	(Date of Organization) (Duration: Year limited liability company we exist or "perpetual")	ll ecase to	1
б.	Upon Qualification		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	dr.	1
7,	9311 San Pedro, Suite 600, San Antonio, TX 78216		201
		全部	2011 MAY
	(Street Address of Principal Office)	TAR ASS	
8.	If limited liability company is a manager-managed company, check here	EE. F	3 A
9,	The name and usual business addresses of the managing members or managers are as follo	SE S	Ö
	Southwest Business Corporation, Sole Member	Sa i	<u></u>
	9311 San Pedro, Suite 600, San Antonio, TX 78216		<u> </u>
			_
th	). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official baving of ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fireign landation of the certificate under oath of the translator must be submitted.)		
11	1. Nature of business or purposes to be conducted or promoted in Florida: provide admin	istrative	<del>-</del>
	and support services for professional employer organizations		<u></u> -
	- Tavril kform		
	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.)		
	David S. Horne, EVP, Southwest Business Corporation		

Typed or printed name of signee

By:

## 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.

If unavailable	, the alternate to be used in	onal Employer Se		······································		
2. The name	and the Florida street addr	ess of the registered at	gent and office are:	JAL SE	201	
	NRAI Services, Inc.			52		es promise
	515 East Park Avenue	(Name)		TARY OF	2011 MAY 1.3 A	
Florida Street Address (P.O. Box NOT ACCEPTABLE)					<b>A</b>	(
	Taliahassee	FL	32301	JAJE- ORIDA	9: 3 <u> </u>	**************************************
		City/State/Zip		,		
liability compo agent and agr relating to the	named as registered agent a any at the place designated ee to act in this capacity. I proper and complete perfo my position as registered a ss, inc.	in this certificate, I her further agree to compl rmance of my duties, a	eby accept the appoing with the provisions and I am familiar with	ntment as register of all statutes and accept the	red	

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

· Hope Andrade Secretary of State

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



## Office of the Secretary of State

## Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for SWBC Professional Employer Services I, LLC (file number 801331513), a Domestic Limited Liability Company (LLC), was filed in this office on October 15, 2010.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate GARY L DUDLEY as the designated registered the above named entity and the designated registered office for said entity is as follows:

9311 SAN PEDRO, SUITE 600

SAN ANTONIO, TX - 78216 USA

In testimony whereof, I have hereunto signed by name officially and caused to be impressed hereonical Seal of State at my office in Austin, Texas on May 2, 2011.



Hope Andrade Secretary of State