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DIVISION OF CORPORATIONS

T. HAMPTON

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COVER LETTER

то:	Registration Section Division of Corporations	
SUBJI	ECT: HR COMP EM	PLOYEE LEASING, LLC
		Name of Limited Liability Company
Please	return all correspondence concern	ting this matter to the following:
	•	Janice Null
		Name of Person
		Incorp Services, Inc.
	BIECT: HR COMP EMPLOYEE LEASING, LLC Name of Limited Liability Company enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of stence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. ase return all correspondence concerning this matter to the following: Janice Null	
		2360 Corporate Circle, Suite 400
``,		Address
	Address Henderson, NV 89074-7722	
1- ₂₋₇		City/State and Zip Code
	Division of Corporations CT: HR COMP EMPLOYEE LEASING, LLC Name of Limited Liability Company osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. turn all correspondence concerning this matter to the following: Janice Null Name of Person Incorp Services, Inc. Firm/Company 2360 Corporate Circle, Suite 400 Address Henderson, NV 89074-7722 City/State and Zip Code Brent@hrcomp.com E-mail address: (to be used for future annual report notification) ser information concerning this matter, please call: unice Null for Incorp Services, Inc. at (702) 866-2500 Name of Person Area Code & Daytime Telephone Number MAILING ADDRESS: Division of Corporations Registration Section Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 action of Corporations Registration Section Clifton Building Colfiction Bridge Fee \$ \$150.00 Filting Fee, Certificate	
	E-mai	l address: (to be used for future annual report notification)
For fur	ther information concerning this r	natter, please call:
ل	<u>:</u>	
		·
* **		
	Talianassee, FL 32314	
Énclo	sed is a check for the follow	ing amount:
	\$125.00 Filing Fee \$130.0	00 Filing Fee & [3155.00 Filing Fee & [3160.00 Filing Fee, Certificate
	— Certifi	icate of Status — Certified Copy — of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: HR COMP EMPLOYEE LEASING, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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 Liability Company," "L.L.C," "LLC.") Tennessee (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) Perpetual 04/21/2011 (Duration: Year limited liability company will cease to (Date of Organization) Upon registration (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7317 Clinton Highway, Suite 101 Powell, TN 37849 (Street Address of Principal Office) 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: Managing Member: Andrea Ball 7317 Clinton Highway, Suite 101, Powell, TN 37849 [10] Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: 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. 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

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 i	s:		
HR COMP EMPLO	YEE LEA	ASING, LLC	· · · · · · · · · · · · · · · · · · ·
If unavailable, the alternate to be used in the state	e of Florida i	s:	
2. The name and the Florida street address of the	e registered a	gent and office are:	
Incorp Services, Inc.			
(Name)			
17888 67th Court North Florida Street Address (P.O. Box NOT ACCEPTABLE)			
Loxahatchee	FL	33470	
C	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.

Janice Jull on behalf of Incorp Services, Inc.
(Signature)

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

SECRETARY OF STATE DIVISION OF CORPORATIONS



STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services

William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

HR COMP, LLC

7317 CLINTON HWY, STE 101 **POWELL, TN 37849**

July 27, 2011

Request Type: Certificate of Existence/Authorization

Issuance Date: 07/27/2011

Request #:

0043911

Copies Requested:

Document Receipt

Receipt #: 517810

Filing Fee:

\$20.00

Payment-Check/MO - HR COMP, LLC, POWELL, TN

\$20.00

Regarding:

HR COMP EMPLOYEE LEASING, LLC

Filing Type:

Limited Liability Company - Domestic

Control #:

656362

Formation/Qualification Date: 04/21/2011

Date Formed:

04/21/2011

Status:

Active

Formation Locale: Knox County

Duration Term: Perpetual

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

HR COMP EMPLOYEE LEASING, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Nichole Hambrick