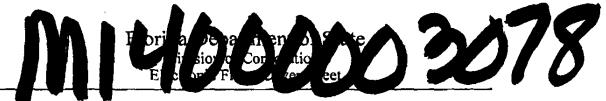
Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000107625 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Phone

Account Number : FCA000000023

Fax Number

: (850)222-1092 : (850)878-5368

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

Email Address:			
	P11	Addmose	

Foreign Limited Liability Company SalesForce4Hire, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$902.50

Electronic Filing Menu

Corporate Filing Menu

Help MAY 0 6 2014

J. BRUCE

https://efile.sunbiz.org/scripts/efilcovr.exe

5/5/2014

## COVER LETTER

TO: Registration Section Division of Corporation	ns		
SUBJECT: SALESFORCE4HI	RE. LLC		
	Name of Limited Liability Company	•	
The enclosed "Application by For Existence, and check are submitted	reign Limited Liability Company for Authorization to Transact Business in Florida, and to register the above referenced foreign limited liability company to transact busing the register the above referenced foreign limited liability company to transact busing the register the above referenced foreign limited liability company to transact busing the register that the register is the register of	' Certificate of ness in Florida	
Please return all correspondence	concerning this matter to the following:		
	Name of Person		
	ranio di Formi		
	Firm/Company		
	Address		
	City/State and Zip Code		
accounting@sale	esforce4hire.com		
<del> </del>	E-mail address: (to be used for future annual report notification)	•	
For further information concerning	g this matter, please call:		
		至。	
- <del></del>	at ()		COLUMN TO SERVICE
Name	of Contact Person Area Code Daytime Telephone Number		1
MAILING ADDRESS:		55	Pomen
Division of Corporations		湯堂	۵.
Registration Section	Registration Section	<u> </u>	
P.O. Box 6327	Clifton Building	T 05	事 中语
Tallahassee, FL 32314	2661 Executive Center Circle	27 T	-
•	Tallahassee, FL 32301	55 -	T an imple
Enclosed is a check for the	following amount:	25/7/ <b>Q</b>	
\$125.00 Filing Fee	□ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, C	ertificate	
ar gradion i milg rec	Certificate of Status Certified Copy of Status & Certified		

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	me unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "lity Company," "L.L.C," or "LLC.")	
2. OI	nio 3. 20-2847030	
	risdiction under the law of which foreign limited liability ampany is organized)  (Fill number, if applicable)	
4	08/01/2012	
_	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. <u>-</u>	i301 Newstead Manor Lane, Raleigh, NC 27606	
_	(Street Address of Principal Office)	<del></del>
6. S	ame	
·		100
_	(Mailing Address)	-₹
	(Mailing Address)	₹
7.	The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	-5
KEV	VIN J SCHIMELFENIG, 5301Newstead Manor Ln, Raleigh, NC 27606	<b>A</b>
		=
		9
havi acce	attached is an original certificate of existence, no more than 90 days old, duly authenticated by the ing custody of records in the jurisdiction under the law of which it is organized. (A photocopy is neeptable. If the certificate is in a foreign language, a translation of the certificate under oath of the trust be submitted)	ot
	Signature of an authorized passes	
	Signature of an authorized person cordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjuty that the facts stated	herein e

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:	
SALESFORCE4HIRE, 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:	
C T Corporation System	
(Name)	201
1200 South Pine Island Road	2014 HAY
Florida Street Address (P.O. Box NOT ACCEPTABLE)	-5
Plantation FL 33324	
City/State/Zip	SIA
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 of registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, Flow Statutes.	is ns of all i and
C T Comparation System  Jordan Brown, Assistant Secretary CT Corporation System	
(Signature)	

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

\$ 5.00

## 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 SALESFORCE4HIRE, LLC, an Ohio Limited Liability Company, Registration Number 1542668, was organized within the State of Ohio on May 13, 2005, is currently in FULL FORCE AND EFFECT upon the records of this office.

PILED
2014 MAY -5 AMII: 19



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 1st day of May, A.D. 2014.

Ohio Secretary of State

on Huster

Validation Number: 201412101197