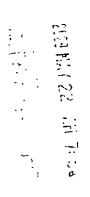
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(Address)
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Account#: 120000000088

Date: May 22, 20	020	Account#. 12000000000
Name: KEN HOW	VELL_	
Reference #:12	223138	<del></del>
Entity Name:	PAYCHEX	HR OUTSOURCING LLC
Articles of Incorporati	ion/Authoriza	ition to Transact Business
Amendment		
Change of Agent		ISSUES? CALL
Reinstatement	KEN:	
Conversion		518-213-0738
✓ Merger		
Dissolution/Withdraw	ral	
☐ Fictitious Name		
Other	** CER	TIFIED COPY UPON FILING **
Authorized Amount:	\$80.00	
Signature:		



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088

Date: May 22, 2020	<u> </u>	Account#, 120000000000
Name: KEN HOWEL	<u>LL</u>	
Reference #: 1223		
Entity Name: PA	YCHEX HR OUTSOURC	ING LLC
Articles of Incorporation/	'Authorization to Transact Busin	ess
Amendment		
Change of Agent		ICCUECS CALL
Reinstatement	ISSUES? CALL KEN:	
Conversion		518-213-0738
✓ Merger		
Dissolution/Withdrawal		
Fictitious Name		
✓ Other	** CERTIFIED COPY UPON FI	LING **
Authorized Amount:	\$80.00	
Signature:		

## COVER LETTER

то:	Amendment Section Division of Corporations						
CHIDI	Paychex HR	Outsourc	ing LLC				
aubi	SUBJECT: Name of Surviving Party						
The e	nclosed Certificate of Merger and fec(s	) are subi	mitted fo	or filing.			
Please	e return all correspondence concerning	this matte	er to:				
	Delaney Jaffarian	·····					
	Contact Person						
	Nixon Peabody LLP						
	Firm/Company						
	1300 Clinton Square						
	Address						
	Rochester NY 14604						
	City, State and Zip C	ode					
	stschaeffer@paychex.com						
	E-mail address: (to be used for future	annual r	eport no	otification)	1		
For fu	urther information concerning this matt	er, please			262 1400		
	Delancy Jaffarian	at (_	585	) \rea Code	Daytime Telephone Number		
	Name of Contact Person		,	rica Code	Daytime Telephone (Vamber		
	Certified copy (optional) \$30.00						
Amer Divis Clifto 2661	EET ADDRESS:  Indiment Section  Island of Corporations  In Building  Executive Center Circle  The bassee, FL 32301		Am Div P. C	endment S	orporations 17		

## Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

<u>Name</u>	Jurisdiction	Form/Entity Type
HRSMARTERX, LLC	Florida	Limited Liability Company
PAYCHEX HR OUTSOURCING LLC	Delaware	Limited Liability Company
SECOND: The exact name, form/entity type	e, and jurisdiction of the survivin	g party are as follows:
Name	<u>Jurisdiction</u>	Form/Entity Type
PAYCHEX HR OUTSOURCING LLC	Delaware	Limited Liability Company

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

1 of 3

2823 MAY 22 AH 7: 54

FOUR	TH: Please check one of the bo	xes that app	oly to surviving enti	ty: (if applicable)				
	This entity exists before the mer are attached.	ger and is	a domestic filing en	tity, the amendme	ent, if any to its p	ublic org	anic record	
This entity is created by the merger and is a domestic filing entity, the public organic record is attached.								
	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.							
	This entity is a foreign entity the mailing address to which the de Florida Statutes is:	at does not partment n	have a certificate on ay send any proces	f authority to trans s served pursuant	sact business in t to s. 605.0117 a	his state. nd Chapte	The er 48,	
							-	
ss.605	H: This entity agrees to pay any n. 1006 and 605.1061-605.1072, F. H: If other than the date of filing fler the date this document is file	S. the delaye	ed effective date of orida Department of	the merger, which	cannot be prior			
as the	If the date inserted in this block document's effective date on the	Departmer	eet the applicable s at of State's records	tatutory filing requ	uirements, this d	ate will n	ot be listed	
•	NTH: Signature(s) for Each Par	ty:	01 ( (3)		Typed or P. Name of Indi	rinted		
	of Entity/Organization: HRSMARTERX, LLO		Signature(s):	2	Efrain Riv		Manager	
	CHEX HR OUTSOURCIN				John Gibs	son, Sole	Manager	
						SELECTIVE PAY		
•	orations:	(If no dir	n, Vice Chairman, I	nature of incorpor	rator.)	· ==		
Florid Non-l	ral partnerships: la Limited Partnerships: Florida Limited Partnerships: ed Liability Companies:	Signatur Signatur	e of a general partners es of all general partners e of a general partners e of an authorized p	tners er	erson OA	7. 55 69		
<u>Fees:</u>	For each Limited Liability Cor For each Limited Partnership: For each Other Business Entity		\$25.00 \$52.50 \$25.00		poration: neral Partnership ppy (optlonal):	:	\$35.00 \$25.00 \$30.00	

FOURTH: Please check one of the	e boxes that ap	ply to surviving en	tity: (if applicable)				
This entity exists before the are attached.	merger and is	a domestic filing e	ntity, the amendment, if	any to its public	organic record		
This entity is created by the	This entity is created by the merger and is a domestic filing entity, the public organic record is attached.						
	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.						
This entity is a foreign entimailing address to which the Florida Statutes is:	ty that does not le department r	have a certificate on ay send any proce	of authority to transact b ss served pursuant to s.	usiness in this sta 605.0117 and Cha	te. The apter 48,		
FIFTH: This entity agrees to pay a ss.605.1006 and 605.1061-605.107		ith appraisal rights	the amount, to which m	embers are entitle	d under		
SIXTH: If other than the date of f days after the date this document is  Note: If the date inserted in this blas the document's effective date or	filed by the Fl	orida Department of	of State:				
SEVENTH: Signature(s) for Each							
	i t aity.	Signature(s):		Typed or Printed me of Individual:			
Name of Entity/Organization: HRSMARTERX, L	LC	Signature(s).	140	Efrain Rivera, Se			
PAYCHEX HR OUTSOUR		Sal.		John Gibson, So	ole Manager		
		0 0	<u> </u>	STALL RATE			
Corporations:	(If no dir	ectors selected, sig	President or Officer nature of incorporator.	22 / \$\$6F	·		
General partnerships:  Signature of a general partner or authorized person  Signatures of all general partners  Signatures of all general partners							
Non-Florida Limited Partnerships: Limited Liability Companies:	Signatur	e of a general partn e of an authorized p	er	2 cu			
Fees: For each Limited Liability	Company:	\$25.00	For each Corporati		\$35.00		
For each Limited Partners For each Other Business E	•	\$52.50 \$25.00	For each General F Certified Copy (o	_	\$25.00 \$30.00		