Filing and License Fee: \$310.00 minimum



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

R.I. DEPT. OF STATE BUS SVOS DIV

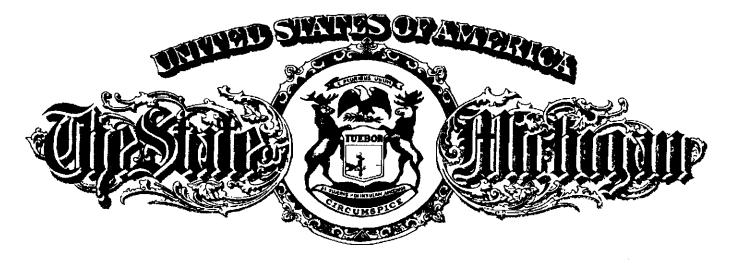
APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1.	The name of the corporation is											
2.	It is incorporated under the laws of Michigan											
3.	The name, if different, which it elects to use in Rhode Island is:											
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "incorporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of above corporate endings for use in Rhode Island:												
	(b)	If the conquality	' and transact business in Rh	e in Rhode Island, then node Island as stated	n set forth below the fictitious name under which the corporation wil in the "Fictitious Business Name Statement" to be filed with this							
4.	The	date of	fits incorporation is	1/13/2010	and the period of its duration is Perpetual							
5.	The	addres	s of its principal office is 340 I	E. Big Beaver Road, S	Suite 160, Troy, Mi 48083.							
6.	The address of its proposed registered office in Rhode Island is 450 Verterans memorial Pkwy., Ste. 7a											
			, .p g		(Street Address, not P.O. Box)							
	E. F	rovide		, RI_ 02914	and the name of its proposed registered agent in Rhode Island at							
			(City/Town)	(Zip Code)								
	that address is C T Corporation System											
	(Name of Agent)											
7.	The	purpos	e or purposes which it propose	es to pursue in the trans	saction of business in Rhode Island are:							
	Em	oloyee	Leasing Company.									
3.	(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state of country of which it is incorporated).											
			<u>Name</u>		<u>Address</u>							
	Direc	ctor	Bonner C. Upshaw III		340 E. Big Beaver Road, Ste. 160, Troy, MI 48083							
	Direc	ctor			FILED m							
	Direc	tor			OCT 1.7 2040							
	Direc	tor		<u> </u>	OCT 1 7 2016							
		No. 150 ed: 06/1			284043							

	(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).											
			<u>Name</u>		<u>Address</u>							
	President	Bonner C. l	. Upshaw III		340 E. Big Beaver Road, Ste. 160, Troy, MI 48083							
	Vice President	None					_					
	Treasurer	Bonner C. Upshaw III			340 E. Big Beaver Road, Ste. 160, Troy, MI 48083							
	Secretary	Bonner C. Upshaw III			340 E. Big Beaver Road, Ste. 160, Troy, MI 48083							
9.	The aggregate numl and series, if any, wind Number of Share 60,000	thin a class, is:		ssue; itemized by classes, par <u>Series</u> None		r value of shares, shares without par valu Par Value or Statement that Shares are without Par Value \$1.00	—					
10.	(a) \$ 623,150.00 following year, (b) \$ 0 Island during the		ed. = An estimate			to be owned by the corporation for the tion's property to be located within Rhoo						
	(c)% = An estimate, expressed as a percentage, of the proportion that the estimated value of the proportion to be located within this state during the following year bears to the value of all property of the corporation be owned during the following year, wherever located. {divide (b) by (a) and multiply by 100 to obtain the percentage}											
11.	11. (a) \$\frac{450,000,000.00}{\text{during the following year.}} = An estimate of the gross amount of business to be transacted by the corp											
	(b) \$\frac{176,000.00}{\text{or from places of business in Rhode Island during the following year.}} = An estimate of the gross amount of business to be transacted by the corporation											
	(c)											
12.	This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated.											
13.	This Application for C	Certificate of Au	thority shall be effective	e upon filing	unless a specified	date is provided which shall be no later						
than the 90th day after the date of this filing,												
Date	: 10/13/1	<u>6</u>		Application attachments correct.	for Certificate of and that all sta	clare and affirm that I have examined the Authority, including any accompanying attements contained herein are true and ized Officer of the Corporation	a					

Type or Print Name of Authorized Officer





This is to Certify That

TRION SOLUTIONS II, INC.

was validly incorporated on January 13, 2010, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 5th day of October, 2016.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau