State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: $150.00

Pursuant to the provisions of RIGL 7-16-49, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

APC Workforce Solutions, LLC

Is this company organized in its state or country of formation as a low-profit limited liability company? Yes ☐ No ☑

The name, if different, under which it proposes to register and transact business in Rhode Island is:

2. The LLC is organized under the laws of: **Florida**

3. The date of its organization is: **09/15/2004**

And the period of its duration is: **CHECK ONE BOX ONLY**

☑ Perpetual (on-going)

☐ Date certain for dissolution _____

4. The name and address of the resident agent/office in Rhode Island is:

Agent Name **Corporate Creations Network Inc.**

Street Address (NOT a P.O. Box) **10 Dorrance Street #700**

City/Town	State	Zip Code
Providence	**RHODE ISLAND**	**02903**

5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Staffing Services

Check the box to indicate an attachment ☐

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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BY XRIW8

FORM 450 - Revised: 11/2017

6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:

11380 Prosperity Farms Road #221E, Palm Beach Gardens, FL 33410

8. The mailing address for the limited liability company is:

420 South Orange Avenue, Suite 600
Orlando, FL 32801

9. Management of the Limited Liability Company:

The Limited Liability Company is to be managed by: **CHECK ONLY ONE BOX**

☐ By its members (If you have checked this box, go to Section 9. (**DO NOT** fill out the chart below.)

☑ By one (1) or more managers (List managers below)

MANAGER	ADDRESS
Doug Goin	**420 South Orange Avenue, Suite 600, Orlando, FL 32801**

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.

11. Date when this application for Certificate of Registration will be effective: **CHECK ONE BOX ONLY**

☑ Date received (Upon filing)

☐ Later effective date (Date must be no more than 30 days from the date of filing) _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of LLC	Date
APC Workforce Solutions, LLC	**9/18/2018**

Signature of Authorized Person

SIGN HERE Robert Gomez, Attorney-In-Fact

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

State of Florida
Department of State

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I certify from the records of this office that APC WORKFORCE SOLUTIONS, LLC is a limited liability company organized under the laws of the State of Florida, filed on September 15, 2004.

The document number of this limited liability company is L04000067735.

I further certify that said limited liability company has paid all fees due this office through December 31, 2018, that its most recent annual report was filed on January 16, 2018, and that its status is active.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Seventeenth day of September, 2018

Ken Detzner

Secretary of State

Tracking Number: CU7333185317

To authenticate this certificate,visit the following site,enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

Limited Power of Attorney

The undersigned Officer of APC Workforce Solutions, LLC, a Florida entity ("the Company"), appoints Robert Gomez as Attorney-in-Fact(s) for the Company and its subsidiaries for the limited purposes authorized in this Limited Power of Attorney. Joseph Panholzer, Special Manager grants to the Attorney-in-Fact the power to execute the documents necessary to change the registered agent, change of address, amendments, fictitious name registrations, fictitious name renewals, qualifications, annual reports, amended annual reports, initial reports, obtain tax clearance/compliance certificate(s), withdraw, dissolve, reinstate, convert or form the Company and its subsidiaries. The named individuals shall act in such office and with such authority as is required to effect the changes contemplated in this Limited Power of Attorney.

This Limited Power of Attorney expires on the earlier of (a) the filing of change of registered agents and/or change of address and/or amendments and/or fictitious name registrations and/or fictitious name renewals and/or qualifications and/or annual reports and/or amended annual reports and/or initial reports and/or withdraw and/or dissolve and/or formations and/or reinstate for the Company and its subsidiaries or (b) six months after the Effective Date set forth below. The Company may revoke this Power of Attorney at any time by written notice to Corporate Creations Network Inc., 11380 Prosperity Farms Road #221E, Palm Beach Gardens, FL 33410.

The undersigned has executed this Limited Power of Attorney effective as of this 18th day of September 2018.

APC Workforce Solutions, LLC
By: _____
Name: Joseph Panholzer
Title: Special Manager

STATE OF FLORIDA
COUNTY OF PALM BEACH

Subscribed and sworn to before me this 18th day of September 2018.

_____
Notary Public

JON-MICHAEL SANCHEZ
Commission # GG 175368
Expires January 15, 2022
Bonded Thru Troy Fain Insurance 800-385-7019

APC WORKFORCE SOLUTIONS III, LLC
111 N. ORANGE AVE. STE. 1400
ORLANDO, FL 32801

September 19, 2018

Rhode Island Secretary of State
CORPORATION SECTION
148 W. River Street
Providence, RI 02904-2615

Subject: Consent to Use Similar Name

We the undersigned, hereby authorize the use of the name **APC Workforce Solutions, LLC** as the name of a filing entity for the purpose of submitting a filing instrument to the secretary of state. The undersigned certifies to being authorized by the holder of the existing name to give this consent.

Thank you.

Sincerely,

Robert Gomez, Attorney-In-Fact
APC WORKFORCE SOLUTIONS III, LLC

Limited Power of Attorney

The undersigned Officer of APC Workforce Solutions III, a Florida entity ("the Company"), appoints Robert Gomez as Attorney-in-Fact(s) for the Company and its subsidiaries for the limited purposes authorized in this Limited Power of Attorney. Joseph Panholzer, Special Manager grants to the Attorney-in-Fact the power to execute the documents necessary to change the registered agent, change of address, amendments, fictitious name registrations, fictitious name renewals, qualifications, annual reports, amended annual reports, initial reports, obtain tax clearance/compliance certificate(s), withdraw, dissolve, reinstate, convert or form the Company and its subsidiaries. The named individuals shall act in such office and with such authority as is required to effect the changes contemplated in this Limited Power of Attorney.

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The undersigned has executed this Limited Power of Attorney effective as of this 19th day of September 2018.

APC Workforce Solutions III, LLC
By: _____
Name: Joseph Panholzer
Title: Special Manager

STATE OF FLORIDA
COUNTY OF PALM BEACH

Subscribed and sworn to before me this 19th day of September 2018.

_____
Notary Public

JON-MICHAEL SANCHEZ
Commission # GG 175368
Expires January 15, 2022
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State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

September 19, 2018 01:03 PM

Nellie M. Gorbea
Secretary of State