F	il	i٢	ıg	Fe	e:	\$1	50	.00
---	----	----	----	----	----	-----	----	-----

License Fee: \$15.00 minimum (§7-1.1-124) €

ID NUMBER.



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

M 57181

Office of the Secretary of State **Corporations Division** 100 North Main Street Providence, Rhode Island 02903-1335

#### **BUSINESS CORPORATION**

### APPLICATION FOR CERTIFICATE OF AUTHORITY (To Be Filed In Duplicate Original)

Fursuant to the provisions of Section 7-1.1-103 of the General Laws, 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	<u> </u>
tatement:	

s:a	tement:						purpose submits the Johnwing.
1	The name of the corpor	ation is	PRO PAY	PLUS,	TAC.	, C	
2	It is incorporated under	the laws of _	STATE	to	DELA	WARE	
3	The name of different, v	vhich it elects	to use in Rhode	Island is.			
	(a) If the name of t "incorporated," or above corporate o	"limited," or a	an abbreviation i	thereof, the	orporation does an list the name	not contain the of the corporation	word "corporation," "company," with the addition of one of the
	(b) If the corporate n qualify and trans application:	ame is not ave act business	ailable in Rhode in Rhode Island	Island, then as stated	n set forth below in the "Fictition	i the fictitious name is Business Name	under which the corporation will Statement" to be filed with this
4	The date of its incorpor	ation is0	7-28-04				PERPETUITY
5	The address of is print	areal office in	the state or cour	ntry under ti	he laws of which	n it is incorporated	19958-9776
5	The address of its prop	osed register	ed office in Rhoc	de Island is	20 C	INGDON.	De
 . = .	Q= 11			_		(Sileer Add	ress, <u>not</u> P.O. Box) gistered agent in Rhode Island at
	SO TINGS70 (City/Town			(Zip Code)	and the hame	or its brohosed ref	gistered agent in tended island or
	that address is		$\epsilon$ $\mathbb{R}_0$	UCPEC	21117		
	Ythat address is	1 3 47 1 10	<u> </u>	(Nam	ne of Agent)		
ن را	्रीhe speafic purpose o	r nurnases sul	nich it pranases	to pursue ir	n the transaction	e of business in Rhi	ode Island are
, ,	Ţ,				_	_	
	TO CONDUC	T A	BUSIN	523	FOR	PROFIT	THAT
	OFFERS	SERVI	CEI -	<u>v (24</u>	RODUC TI	( PAY KOLL HI	COTING SOFTWARE
8	The names and respec	* . *			TE	SUINING .	APPLICATION)
			<u>Name</u>			<u>Addre</u>	<u>s<b>s</b></u>
	Director						
	Director						<u> </u>
	President (	LAIRE	Bouble	AULT_	20 (41	1600N DO	Se KINGSTOLUNKI
	Vice President S	ERGE	BOUDRE	AULT_	- /1		
	Treasurer	CHAIRE	BOUNRE				- FILED
	Secretary (	IARE	ROUDREA	ULT _			NOV 9 2 2001
ŕ	orm No. 150	· .					NOV 23 2004
	evised. 01/99	-					By Conc

O The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and within a class, is  Par Value or Statement of Shares  Class  Series  Series  Shares are without Paragraph of the value of all property to be owned by the corporation for the following year, wherever the stimate of the value of the corporation's property to be located within Rhode Island during the following year bears to the value of the propertion to be own following year, wherever located within this state during the following year bears to the value of all property of the corporation to be own following year, wherever located, is	Par Value	Par Value or Stater Shares are without	Series HMON	Class (	mber of Shares		
Par Value or Stateme Shares Class Series Shares are without P.  (a) An estimate of the value of all property to be owned by the corporation for the following year, wherever  (b) An estimate of the value of the corporation's property to be located within Rhode Island during the following year, wherever  (c) An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be own following year, wherever located, is	d series, if any	hares without par value, an	sses, par value of shares,	shares, itemized by cl			
(b) An estimate of the value of the corporation's property to be located within Rhode Island during the follows:  (c) An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be own following year, wherever located, is		Shares are without	<del></del>	Class D	mber of Shares	Numbe	
(c) An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be own following year, wherever located, is	ever located, is	the following year, where	ned by the corporation to	all property to be ov	timate of the value of	_	(a)
located within this state during the following year bears to the value of all property of the corporation to be own following year, wherever located, is	ollowing year is	Rhode Island during the fo	rty to be located within	the corporation's prop	timate of the value of	An estima	(b)
(a) An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Island during the following year is \$ 28 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	wned during th	of the corporation to be ov	to the value of all propert	the following year bear	d within this state during	located wi	(c)
Island during the following year is \$ 28 a c c c c c c c c c c c c c c c c c c	owing year is	poration during the follo	e transacted by the co	nount of business to		_	(a)
corporation at or from places of business in this state during the following year bears to the gross amount ther be transacted by the corporation during the following year is	iiness in Rhode	on at or from places of bus	transacted by the corpora	nount of business to t	timate of the gross am during the following year	An lestima Island dui	(b)
by the secretary of state or other authorized officer of the jurisdiction of its incorporation  PROPRY PLUS INC.  Print Exact Name of Corporation Making Applica  By Clause Brussel	iereof which wi	ears to the gross amount th	during the following year b	of business in this state	ation at or from places of nsacted by the corporatio	corporation be transa	(c)
Print Exact Name of Corporation Making Applica  By Conce Buckers	ly authenticate						
	cation	INC : f Corporation Making Applic	PROPAS PLV Print Exact Name		05-04	18-05	te <u>()</u>
		u decault	y Ceniu B				
·	eck one)		•				
By Clair Bandrault	, <u></u>	dreault	y Clair Bac				
Secretary or Assistant Secretary (chec	eck one)	Assistant Secretary (che	Secretary or		.) ,		
COUNTY OF JUNE SOUND				lund	Khode So		
In this 5th day of Author 2004, person who, being by me first duly swom, declared to the corporation and that he/she signed the foregoing such officer of the corporation, and that the statements herein contained are true.		,	· J j	**	Providence	me C	

Filing Fee: \$50.00

ID Number: 14462



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

1.2 C2 103 SECTION SEC

# FICTITIOUS BUSINESS NAME STATEMENT (To Be Filed In Duplicate)

Pursuant to the provisions of Section 7-1.1-7.1, 7-16-9 or 7-13-2 of the General Laws, 1956, as amended the undersigned business corporation, limited liability company or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1.	The legal name of the applicant business corporation, limited liability company or limited partnership is:  Ro Pay Plus Inc.
2.	The fictitious business name to be used is R.I. GIFT BASKET G. 194.
3.	The state or territory under the laws of which it is incorporated, organized or formed is
4.	The date of incorporation, organization or formation is JAN 38, 3004
5.	If a business corporation, the address of its registered office within Rhode Island is  OUCONGDON DR. SO. KINGSTOWN RI 028 19
6.	If a business corporation, the business in which it is engaged
7.	Applicant is otherwise authorized to do business in the state of Rhode Island.
Da	Under penalty of perjury, I declare that the information contained herein is true and correct.  PROPAY RVS Inc.  Name of Applicant Corporation, Limited Liability Company or Limited Partnership  By Clause Budstautt I Russ.  Signature of Officer for the Corporation Title
	By
	NOV 23 2004  By  Signature of Authorized Person for the Limited Partnership



PAYROLL PLUS CORPORATION.

TRANSPORT LEASING/CONTRACT, INC.

August 16, 2004

Ms. Claire Boudreault 20 Congdon Drive South Kingston, Rhode Island 02679

Re: Pro Pay Plus, Inc.

Dear Ms. Boudreault:

Payroll Plus Corporation ("PPC") is a wholly-owned subsidiary of Transport Labor Contract/Leasing Inc. ("TLCL"). I serve as the corporate secretary of both TLCL and PPC.

I hereby certify that TLCL and PPC do not object to your company doing business under the name, Pro Pay Plus, Inc. I further certify that TLCL and PPC do not object to the registration of the name Pro Pay Plus, Inc. to do business in the state of Rhode Island. This approval is based on your representation that Pro Pay Plus, Inc. is not in the employee leasing business.

Signed this 16<sup>th</sup> day of August, 2004.

By. Rodpey W. Jordan

Secretary Payroll Plus Corporation

Secretary - Transport Labor Contract/Leasing, Inc.

Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "PROPAYPLUS, INC.", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2004, AT 3:31 O'CLOCK P.M.



AUTHENTICATION: 3224658

DATE: 07-09-04

3756776 8100

040506844