

F15000002023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

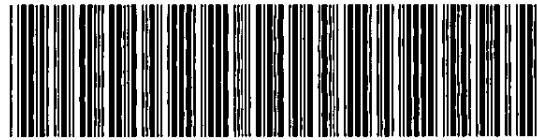
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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FILED

2015 MAY 11 AM 8:37

SECRETARY OF STATE  
1117 MARKET STREET  
HARRISBURG, PA 17104

RECEIVED

15 MAY 11 AM 10:57

DEPARTMENT OF REVENUE  
HARRISBURG, PA 17104

*Wells*  
5/11/15

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 623105 4612432

AUTHORIZATION :

COST LIMIT :

*Lydia Cohen*  
\$70.00

ORDER DATE : May 8, 2015

ORDER TIME : 9:18 AM

ORDER NO. : 623105-010

CUSTOMER NO: 4612432

FOREIGN FILINGS

NAME: BEAR STAFFING SERVICES  
CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Bear Staffing Services Corporation  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person at (\_\_\_\_\_) \_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Bear Staffing Services Corporation  
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "In.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 20-2858974  
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 18, 2005 5. Perpetual  
 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A  
 (Date first transacted business in Florida, if prior to registration)  
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 47 S. Broad Street, Woodbury, NJ 08096  
 (Principal office address)

47 S. Broad Street, Woodbury, NJ 08096  
 (Current mailing address)

2015 MAY 11 AM 8:37  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company


Office Address: 1201 Hays Street

Tallahassee Florida 32301  
 (City) (Zip code)

9. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Corporation Service Company

By   
 (Registered agent's signature)

**Lydia Cohen**  
 Asst. Vice President

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Sherri Johnson

Address: 15 Polo Run

Mickleton, NJ 08096

Director: Gary Johnson

Address: 15 Polo Run

Mickleton, NJ 08096

**B. OFFICERS**

President: Sherri Johnson

Address: 15 Polo Run

Mickleton, NJ 08096

Vice President: Gary Johnson

Address: 15 Polo Run

Mickleton, NJ 08096

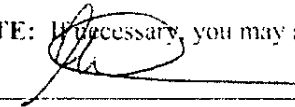
Secretary: Gary Johnson

Address: 15 Polo Run, Mickleton, NJ 08096

Treasurer: Gary Johnson

Address: 15 Polo Run, Mickleton, NJ 08096

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  \_\_\_\_\_  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Gary Johnson Vice President \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

**BEAR STAFFING SERVICES CORPORATION**

0400092840

*With the Previous or Alternate Name*

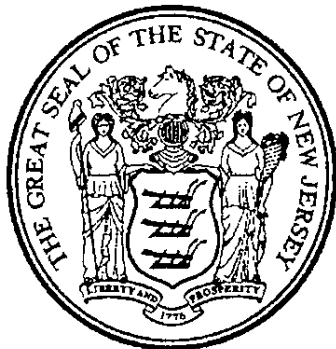
**BEAR STAFFING SERVICES, INC. (Alternate Name)**

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on May 18, 2005.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and registered office are:*

*Corporation Service Company  
830 Bear Tavern Road  
West Trenton, NJ 08628*



Certification# 136230029

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed my  
Official Seal at Trenton, this  
8th day of May, 2015*

*Andrew P Sidamon-Eristoff  
State Treasurer*

Verify this certificate at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)