

F17000001388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

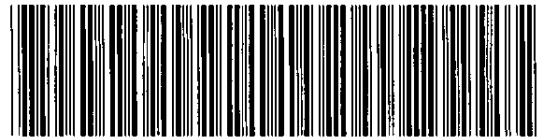
(Business Entity Name)

(Document Number)

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

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17 MAR 24 AM 8:12  
TALLAHASSEE, FLORIDA

2017 MAR 24 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

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Account#: I20000000088

Date: 03/24/2017

Name: Marisa Kugelmann

Reference #: A287649

ENTITY NAME: FLOYD LEE LOCUMS, INC.

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Annual Report
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other: certified copy upon filing

Authorized Amount: \$78.75

Signature: 

**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. FLOYD LEE LOCUMS, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. South Carolina 3. 81-4892973  
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 01/04/2017 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 1643B Savannah Hwy B #399, Charleston, SC 29407  
(Principal office address)

(Current mailing address, if different)

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

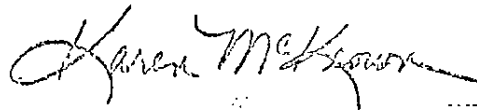
Name: National Corporate Research, Ltd., Inc.

Office Address: 115 North Calhoun Street, Suite 4

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.*



(Registered agent's signature)

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.

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

**A. DIRECTORS**

Chairman: Natasha Lee, CEO

Address: 1643B SAVANNAH HWY B # 399  
CHARLESTON, SC 29407

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

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

Director: Meghan Porter, Director of Operations

Address: 1643 B SAVANNAH HWY B # 399  
CHARLESTON, SC 29407

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: \_\_\_\_\_

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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

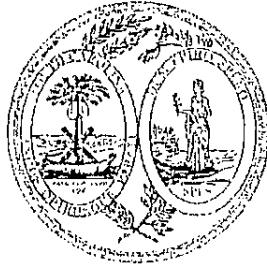
12. *Meghan Porter* Digitally signed by Meghan Porter  
DN: cn=Meghan Porter, o=1800ly HealthCare Staffing Group, ou=Chief Account Manager - License Division, email=porter@1800ly.com,  
c=US  
Date: 2017.03.17 12:54:04 -0400  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. Meghan Porter, Director of Operations  
(Typed or printed name and capacity of person signing application)

17 MAR 24 AM 11:58  
ACCEPTED FOR FILING  
STATE OF SOUTH CAROLINA

# *The State of South Carolina*



*Office of Secretary of State Mark Hammond*


## **Certificate of Existence**

**I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:**

**FLOYD LEE LOCUMS, INC.,**

a corporation duly organized under the laws of the State of South Carolina on January 4th, 2017, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Anri. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal  
of the State of South Carolina this 24th day  
of March, 2017.

  
Mark Hammond, Secretary of State