

F12000005011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

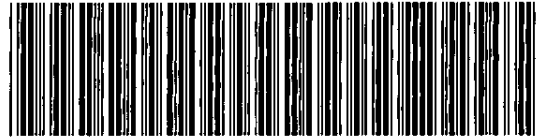
(Business Entity Name)

(Document Number)

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

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2012 DEC 13 AM 8:00

144



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 456676 7374051

AUTHORIZATION :

COST LIMIT : \$ 70

ORDER DATE : December 12, 2012

ORDER TIME : 9:42 AM

ORDER NO. : 456676-010

CUSTOMER NO: 7374051

FOREIGN FILINGS

NAME: PORT CITY STAFFING, INC.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis -- EXT# 2926

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

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Port City Staffing, Inc.

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:

Paul R. Tyndall, Esq.

Name of Person

609A Piner Road

Firm/Company

Suite 327

Address

Wilmington, NC 28409

City/State and Zip code

pptyndall@gmail.com

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

For further information concerning this matter, please call:

Paul R. Tyndall

Name of Person

at (910) 232-1733

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. **Port City Staffing, 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. **North Carolina**

(State or country under the law of which it is incorporated)

3. **45-4354263**

(FEI number, if applicable)

4. **January 25, 2012**

(Date of incorporation)

5. **perpetual**

(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. **4000 Oleander Drive, Suite 2B, Wilmington, NC 28403**

(Principal office address)

**4000 Oleander Drive, Suite 2B, Wilmington, NC 28403**

(Current mailing address)

8. **conduct an employment staffing business**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: **CORPORATION SERVICE COMPANY**

Office Address: **1201 HAYS STREET**

**TALLAHASSEE**

(City)

**Florida**

**32301**

(Zip code)

10. 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.

**Harry B. Davis**  
**Asst. Vice President**

(Registered agent's signature)

11. 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.

FILED  
12 DEC 13 AM 8:00  
TALLAHASSEE, FL  
CLERK OF THE CIRCUIT COURT

FILED

12 DEC 13 AM 8:00

SECRETARY OF STATE  
WILMINGTON, DEL. DA

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

A. DIRECTORS

Chairman: Rocco Wadsworth

Address: 4000 Oleander Drive, Suite 2B

Wilmington, NC 28403

Vice Chairman: John N. Reynolds

Address: 4000 Oleander Drive, Suite 2B

Wilmington, NC 28403

Director: Clare Wadsworth

Address: 4000 Oleander Drive, Suite 2B

Wilmington, NC 28403

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

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

B. OFFICERS

President: Rocco Wadsworth

Address: 4000 Oleander Drive, Suite 2B

Wilmington, NC 28403

Vice President: John N. Reynolds

Address: 4000 Oleander Drive, Suite 2B

Wilmington, NC 28403

Secretary: Clare Wadsworth

Address: 4000 Oleander Drive, Suite 2B, Wilmington, NC 28403

Treasurer: Clare Wadsworth

Address: 4000 Oleander Drive, Suite 2B, Wilmington, NC 28403

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

13. 

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.

14. Rocco Wadsworth

(Typed or printed name and capacity of person signing application)



# NORTH CAROLINA

## Department of the Secretary of State

FILED  
DEC 13 AM 8:00  
SECRETARY OF STATE  
RALEIGH, NC

### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### PORT CITY STAFFING INC.

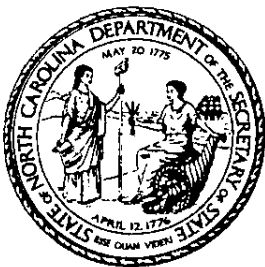
is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 25th day of January, 2012, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of December, 2012.

*Elaine F. Marshall*

Secretary of State



Scan to verify online.