

# F0000000002662

To: Registration Section  
Division of Corporations

SUBJECT: STAFFING PROFESSIONALS, 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", 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:

DEBRA TEEMS  
(Name of Person)

800003211258--5  
-04/17/00--01116--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

STAFFING PROFESSIONALS, INC  
(Firm/Company)

225 TOWNPARK DR. SUITE 150  
(Address)

KENNESAW GA 30144  
(City/State/Zip)

W-10 588

Should you need to call someone concerning this matter, please call:

Debra Teems at (770) 590 9882 EXT 102  
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

00 MAY 12 AM 9:52

FILED

42 5/12

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration 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

7p



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 21, 2000

DEBRA TEEMS  
STAFFING PROFESSIONALS, INC.  
225 TOWNPARK DR. SUITE 150  
KENNESAW, GA 30144

SUBJECT: STAFFING PROFESSIONALS, INC.  
Ref. Number: W00000010588

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00 MAY 12 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

We have received your document for STAFFING PROFESSIONALS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers  
Document Specialist

Letter Number: 700A00022117



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

May 3, 2000

STAFF PRO, INC.  
STAFFING PROFESSIONALS, INC.  
225 TOWNPARK DR. SUITE 150  
KENNESAW, GA 30144

We have received your document for STAFF PRO, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Thank you for returning your name resolution form. You must still correct the application itself, as requested in our previous letter. Please refer to the attached, highlighted copy of our previous letter and correct your application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers  
Document Specialist

Letter Number: 300A00024556

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00 MAY 12 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**RESOLUTION OF BOARD OF DIRECTORS**  
(Please print or type)

I, the undersigned James C. Stockett, do hereby certify  
(Name)

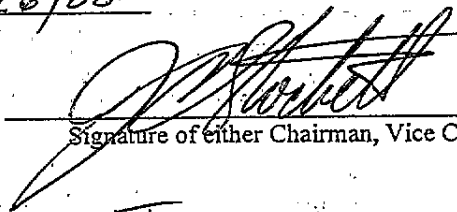
that this Resolution of the Board of Directors of \_\_\_\_\_  
STAFFING PROFESSIONALS INC  
(Corporate Name)

a corporation duly organized and existing under the laws of the State of Alabama,  
was duly adopted on April 26, 2000.

Be it resolved, that STAFFING PROFESSIONALS INC,  
(Corporate Name)

organized and existing in the State of ALABAMA, hereby adopts the name  
STAFF PRO, INC for use in Florida.

Dated: 4/26/00

  
\_\_\_\_\_  
Signature of either Chairman, Vice Chairman or any officer

JAMES C. STOCKETT  
\_\_\_\_\_  
Type or print Name

INHS19(1/00)

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00 MAY 12 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**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. STAFFING PROFESSIONALS INCORPORATED  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Alabama  
(State or country under the law of which it is incorporated)
3. 58-237199Z  
(FEI number, if applicable)
4. 1/22/98  
(Date of incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. "Upon Qualification"  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 225 Town Park Dr Suite 150 Kennesaw GA 30144  
(Principal office address)  
b. 225 Town Park Dr Suite 150 Kennesaw Ga 30144  
(Current mailing address)
8. Professional Staffing For Information Technology  
(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 or Mail Drop Box **NOT** acceptable)  
Name: Karen Streaker  
Office Address: 12979 N. Branch Rd  
Sarasota, Florida, Florida 34240-9000  
(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.

Karen Streaker  
(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.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

A. DIRECTORS

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

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

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

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

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

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

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

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

B. OFFICERS

President: Nancy L. Sackett

Address: 3469 Mill Bridge Dr.

Maricopa Ga 30062

Vice President: Maureen Long

Address: 1131 Bridgeway Ave

Canton Ga 30114

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

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

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

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

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

13. Nancy L. Sackett  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

# STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Staffing Professionals Incorporated incorporated in Morgan County, Decatur, Alabama on January 22, 1998. I further certify that the records do not disclose that said Staffing Professionals Incorporated has been dissolved.

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00 MAY 12 AM 9:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

March 21, 2000

Date

A handwritten signature in cursive script, reading "Jim Bennett".

Jim Bennett

Secretary of State