F00000005554

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: <u>Superior Staffing S</u> (Name of co	Services, Inc. propration - must include suffix)
Dear Sir or Madam:	7009034119377
The enclosed "Application by Foreign Corpora "Certificate of Existence", and check are submit to transact business in Florida.	tion for Authorization to Transact Business in Florida", itted to register the above referenced foreign corporation
Please return all correspondence concerning thi	s matter to the following:
Kim Taffner	
(1	Name of Person)
	ng Services, Inc. irm/Company)
250 Internation	al Dr.
	(Address)
Williamsville,	NY 14231-9057
· · · · · · · · · · · · · · · · · · ·	City/Great //Zin)
Should you need to call someone concerning the	2 CR
Kim Taffner at (at (716) 631-8310 2 3 9 5 9 5 9 7 1 1 1 1 1 1 1 1 1 1
(Ivalue of Ferson)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
☑ \$70.00 Filing Fee & Certificate of State	

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.

(Name of corpo words or abbre	or Staffing Services, Inc. oration; must include the word "INCORPORATED", viations of like import in language as will clearly ind or partnership if not so contained in the name at prese	"COMPANY", "CORPORATION" or icate that it is a corporation instead of a	
2. <u>New Yo</u>	rb 3	16-0908669	-
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)	<u></u>
4. 11/12/19 (Da			
6. We cur (Date firs	rently do not conduct busine t transacted business in Florida.) (SEE SECTIONS 6	ss in Florida, but we exp 07.1501, 607.1502 and 817.155, F.S.)	pect to.
7. <u>Superi</u>	or Staffing Services, Inc.		
250 In	ternational Dr. PO Box 9057	Williamsville, NY 1423	31-9057
	(Current mailing address)		<u>· · · · · · · · · · · · · · · · · · · </u>
(Purpose	t business in the temporary (s) of corporation authorized in home state or country reet address of Florida registered agent: (P.C. Barton J. Stanley	to be carried out in state of Florida)	DIVISION OF C
	1571 Robert J. Conlan Blvd.	NT FO	- 1 RE
Office Address.			□ Γ
	Palm Bay		2 39°
		(Zip code)	~ ?≧
10. Registered a	agent's acceptance:		94 10 10 10 10 10 10 10 10 10 10 10 10 10
this application, I with the provision:	ed as registered agent and to accept service of proce hereby accept the appointment as registered agent a s of all statutes relative to the proper and complete p my position as registered agent. Registered agent's signatu	and agree to act in this capacity. I further agreerformance of my duties, and I am familiar v	ree to comply
11. Attached is a c	ertificate of existence duly authenticated, not more th	nan 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

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

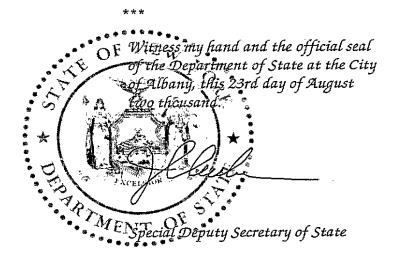
A. DIRE	CTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:		.e
Address:		
_		<u></u>
Vice Chair	rman:	
Address:		
-		£. '
Director:	Lynne Marie Finn	
	273 55 3	, #**
	Buffalo, NY 14214	
Director: _	Dolores Stenclik	
Address: _	55 Knollwood Lane	
	Williamsville, NY 14221 CERS (Street address only - P.O. Box NOT acceptable)	
	Lynne Marie Finn	
Address: _	371 Depew Avenue	
<u>-</u>	Buffalo, NY 14214	-
Vice Presid	dent: Dolores Stenclik	٠
Address: _	55 Knollwood Lane	
_	Williamsville, NY 14221	-
Secretary:	Dolores Stenclik	,
Address: _	55 Knollwood Lane	. مسد
_	Williamsville, NY 14221	
Treasurer:	Lynne Marie Finn	·
Address: _	371 Depew Avenue	حي ا
_	Buffalo, NY 14214	_
NOTE: If	f necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	$\mathcal{Z}_{\cdot \cdot \cdot \cdot \cdot} \sim \mathcal{Z}_{\cdot \cdot \cdot \cdot}$	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14	Lynne Marie Finn	
	(Typed or printed name and capacity of person signing application)	

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of SUPERIOR STAFFING SERVICES, INC. was filed on 11/12/1965, under the name of SUPERIOR SECRETARIAL SERVICES, INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

A Certificate of Amendment SUPERIOR SECRETARIAL SERVICES, INC., changing its name to SUPERIOR TEMPORARY SERVICES, INC., was filed 04/16/1980.

A Certificate of Amendment SUPERIOR TEMPORARY SERVICES, INC., changing its name to SUPERIOR STAFFING SERVICES, INC., was filed 12/15/1997.



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