# F04000002657

(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:
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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 5, 2004

HARRIET STRICKLEN 110 E. BROWARD BLVD., SUITE 1700 FORT LAUDERDALE, FL 33301

SUBJECT: ACCESS MEDICAL STAFFING & SERVICES INC.

Ref. Number: W04000017262

We have received your document for ACCESS MEDICAL STAFFING & SERVICES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 204A00030663

### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations										
SUBJECT: GCCESS Medical Staffing & Services (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:										
Harriet S. Strickler										
AMS - DBA (Name of Person)										
Access medical Braffing & Sarvicano										
(Firm/Company)										
110 E. Broward BUS Sunto 1700										
(Address)										
Ft Canderdala, FC 3330) (City/State and Zip code)										
(Citý/State and Zip code)										
For further information concerning this matter, please call:										
Marriet 83 (800) 780 - 8805 × 300 78 2 2 (Name of Person) (Area Code & Daytime Telephone Number)										
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 & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy 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 BUSINÉSS IN THE STATE OF FLORIDA.

Access medical Staffing & Senices Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")
mes, cos, cosp, mes, cos, or cosp.
AMS Dra
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
(State or country under the law of which it is incorporated)  (FEI number, if applicable)
5/01 5. 54egro 5/2006
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
(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.)
110 E Browend Blvd. Suts 1700
(Principal office address)
1300 Oliver 89 Brita 380 Janver 99 (864284
(Current mailing address)
Provide Supplemental Temporary Stations (abo
(Purpose(s) of corporation authorized in home state or country to be carried out in state of (Florida)
P. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Hereich Stricklan
Office Address: No E. Browney & Blyd, Suite 1700.
(City), Florida 33301 (Zip code)
(City) (Zip code)
O Pagistanad agent's agentungs

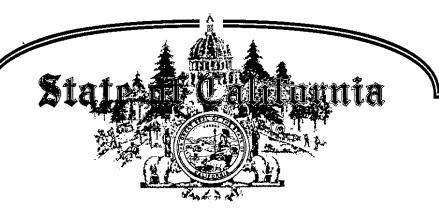
Registered agent's acceptance:

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)

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

A. DIRECTO			•			1_				
Chairman:	18rret	S. S4	rick	len		· · · · · · ·				·
Address: 33	45 Spr	assip	S	.,				-	<u> </u>	,
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Vice Chairman:				<u> </u>				<u></u>		· <del></del> ·
Address:	<u> </u>									
Director:										
Address:		* * · · · · · · · · · · · · · · · · · ·				<u> </u>	·• <u>·</u> -			<del></del> : -
Director:										
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B. OFFICER									*	<del>- 7</del> .
President:				34		····	<u> </u>			
Address:								70		<del>- 4</del> 0e-1
Vice President:	<u></u>	<u> </u>				· · · · · ·		_ <del></del> 		
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Secretary:		and the same of the						<b>35</b> ///	ာ <u></u>	
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Address:	·	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u>.</u>	.=-	
NOTE: If nec	cessary, you may a	ttach an addenc	lum to the a	application	listing a			or direct		
13.	(Signature of Di	rector or Office	r listed in n	umber 12 o	of the ap		<del></del>	 		•
14. <u>Har</u>	(Typed	or printed name						Dw	<u>ec</u> f0	<u>.                                    </u>



#### **SECRETARY OF STATE**

## CERTIFICATE OF STATUS DOMESTIC CORPORATION

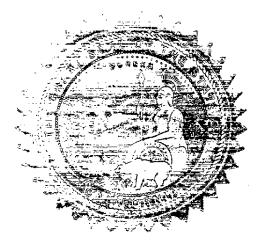
I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the 2nd day of May, 2001, ACCESS MEDICAL STAFFING & SERVICES. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 26, 2004.

KEVIN SHELLEY Secretary of State