

F09 00000/358

(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:

Office Use Only



500147885955

04/02/09--01028--018 **87.50

FILED
09 APR -2 PM 1:51
TALLAHASSEE, FLORIDA

EP 4/3/09

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: TEMPS PLUS, 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:

MARK WEST
(Name of Person)
TEMPS PLUS, INC.
(Firm/Company)
268 N. LINCOLN AVE., STE. 12
(Address)
CORONA, CA 92882-7103
(City/State and Zip code)

For further information concerning this matter, please call:

MARK WEST at (951) 5498309 x202
(Name of Person) (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. TEMPS PLUS, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

TEMPS PLUS OF FLORIDA

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

2. CALIFORNIA 3. 33-0705521
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. APRIL 24, 1996 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 295 NE 5TH AVE. #22, DELRAY BEACH, FL 33483
(Principal office address)

268 N. LINCOLN AVE., STE. 12, CORONA, CA 92882
(Current mailing address)

8. REAL ESTATE SALES & TEMPORARY STAFFING
(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: CHRISTEEN CUBILLOS

Office Address: 295 NE 5TH AVE. #22

DELRAY BEACH, Florida 33483
(City) (Zip code)

FILED
09 APR -2 PM 1:51
STATE
TALLAHASSEE, FLORIDA

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.



(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. DIRECTORS

Chairman: LOUIE S. NORWOOD

Address: 268 N. LINCOLN AVE. STE. 12
CORONA, CA 92882

Vice Chairman: N/A

Address: —

Director: N/A

Address: —

Director: N/A

Address: —

B. OFFICERS

President: LOUIE S. NORWOOD

Address: 268 N. LINCOLN AVE. STE. 12
CORONA, CA 92882

Vice President: N/A

Address: —

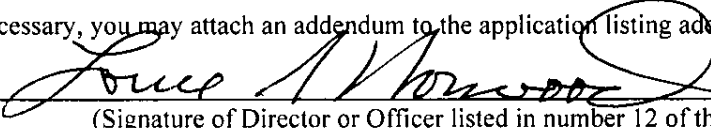
Secretary: LOUIE S. NORWOOD

Address: 268 N. LINCOLN AVE. STE. 12, CORONA, CA 92882

Treasurer: LOUIE S. NORWOOD

Address: 268 N. LINCOLN AVE. STE. 12, CORONA, CA 92882

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. LOUIE S. NORWOOD / SECRETARY
(Typed or printed name and capacity of person signing application)

09 APR -2 PM 1:51
STATE
TALLAHASSEE, FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

TEMPS PLUS, INC.

09 APR -2 PM 1:51
RECEIVED
TALLAHASSEE, FLORIDA

FILE NUMBER: C1901742
FORMATION DATE: 04/24/1996
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to exercise
all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of March 30, 2009.

Debra Bowen

DEBRA BOWEN
Secretary of State