# F16000001672

(Re	questor's Name)			
•	,			
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	<del>?</del> #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
		<u>,                                      </u>		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
•	_			
Special Instructions to	Filing Officer:			





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APR 12 2016

J SHATTE

### **COVER LETTER**

	ration Secon of Corp					
SUBJECT:	KELLY RI	GHT INTERNATIO	ONAL, INC	•		
		Name of	corporation	on - mu	st include suffix	
Dear Sir or Ma	adam:					
"Certificate of	Existence		of Good St	anding'	and check are sul	nct Business in Florida," comitted to register the
Please return a	II correspo	ondence concernin	g this matt	ter to th	e following:	
Stefanie Farrel						,
			Name o	of Perso	n	A.
Kelly Right Inte	rnational, I	nc	<u>.</u>			
			Firm/Co	mpany		
9244 W Harbor	lsle Ct					
			Ado	lress		
Crystal River, F	L 34429					
sfarrel@kellyrig	ght.com		City/State	and Zi	ocode	
· · · · · · · · · · · · · · · · · · ·		E-mail address:	(to be used	l for fu	ure annual report	notification)
For further inf	ormation c	oncerning this ma	tter, please	e call:		
Stefanie Farrel		а	t ( <u>509</u>	ի 99	8-3350	
Name	of Person		Area Co	ode	Daytime Telep	phone Number
Regist Divisio Cliftor 2661 E Tallah	ration Secton of Corp a Building Executive Casses, FL	orations Center Circle			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
\$70.00 Fili	ng Fee	□ \$78.75 Filing Certificate of			.75 Filing Fee & tified 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.	KELLY RIGHT INTERNATIONAL, INC.					
		orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		
		REAL ESTATE able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)		
2.	337.4	•	_	46-4282664		
	(State or countr	y under the law of which it is incorporated)	)	(FEI number, if applicable)		
4.	05/13/2013		5.			
	(Date	of incorporation)		(Date of duration, if other than perpetual)		
6.						
7	140 S ARTHUR			n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
/٠.ِ			ncij	pal office address)		
		(Current m	aili	ng address, if different)		
8.	Name and street	et address of Florida registered agent: (	(P.¢	O. Box NOT acceptable)		
	Name:	Stefanie Farrel			e Marie	
O	ffice Address:	9244 W Harbor Isle Ct		<u> </u>	ا السر	
		Crystal River		, Florida 34429	9	
		(City)		(Zip code)		

#### 9. 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)

10. 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.

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman: Joseph Kelly	
Address: 140 S Arthur St. #600	
Spokane, WA 99202	
Vice Chairman: Stefanie Farrel	<del></del>
Address: 140 S Arthur St. #600	
Spokane, WA 99202	
Director: Craig Farrel	
Address: 140 S Arthur St. #600	
Spokane, WA 99202	
Director:	
Address:	· · · · · · · · · · · · · · · · · · ·
	200
B. OFFICERS	
President: Joseph Kelly	(A)
Address: 140 S Arthur St. #600	
Spokane, WA 99209	
Vice President: Stefanie Farrel	
Address: 140 S Arthur St. #600	
Spokane, WA 99202	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms are true and that he or she is aware that false information submitted in a document to the Dera third degree felony as provided for in s.817.155, F.S.	

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



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,

## CERTIFICATE OF EXISTENCE

**OF** 

KELLY RIGHT INTERNATIONAL, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 5/13/2013.

I FURTHER CERTIFY that the entity's duration is Perpetual,

and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest and penalties owed to this state and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Date: April 1, 2016

UBI: 603-303-192

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

- 777777

Kim Wyman, Secretary of State



HARRY.

hereby issue this