

4/20/2016 9:28:33 AM From: To: 50617-83(1)
Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Labor Ready Mid-Atlantic, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

2016 APR 20 AM 10:54

CALLAHAN, FLORIDA

2016 APR 20 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Labor Ready Mid-Atlantic, 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," or "Certificate of Good Standing" 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:

Name of Person

Labor Ready Mid-Atlantic, Inc.

Firm/Company

1015 A Street

Address

Tacoma, WA 98402

City/State and Zip code

ddinwiddie@trueblue.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danylla Dinwiddie

at (253) 680-8474

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

**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. Labor Ready Mid-Atlantic, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Washington 3. 22-3606736
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/28/1998 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1015 A Street, Tacoma, WA 98402
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

C T Corporation System

By: Hiedi M. Luech
(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.

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: James Defebaugh

Address: 1015 A Street

Tacoma, WA 98402

Director: Derrek Gafford

Address: 1015 A Street

Tacoma, WA 98402

B. OFFICERS

President: Wayne Larkin, President

Address: 1015 A Street

Tacoma, WA 98402

Vice President: James Defebaugh

Address: 1015 A Street

Tacoma, WA 98402

Secretary: Todd Gilman

Address: 1015 A Street

Treasurer: Derrek Gafford

Address: 1015 A Street

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

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Todd Gilman, Secretary

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

FILED
2016 APR 20 A 09 48
CLERK OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

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

**CERTIFICATE OF EXISTENCE
OF
LABOR READY MID-ATLANTIC, 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 8/28/1998.

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 19, 2016

UBI: 601-898-135

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

Kim Wyman, Secretary of State

