

# F17000005230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

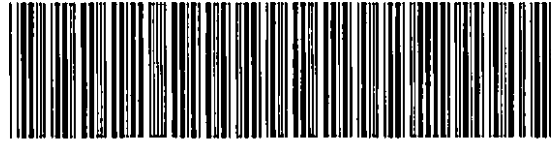
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Spoke to Melissa on 11/20/17  
add Inc to DBA name

name?  
W17-88390

Office Use Only



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FILED  
17 NOV 20 PM 7:52  
DIVISION

NOV 20 2017



November 13, 2017

Ms. Octavia Simmons  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

2017 NOV 14 PM 1:11

RE: Foreign Corporation Registration, W17000088390

Dear Ms. Simmons,

Wellspring Nurse Source is a Joint Commission Certified Healthcare Staffing Firm that provides Nurse and Allied Healthcare Professionals to healthcare facilities across the nation. We are looking to expand our services to be able to place healthcare staff within the state of Florida. We are applying for a Health Care Services Pool license, and we have registered with the Department of State to be able to do business in Florida.

Wellspring Nurse Source, LLC is a wholly owned subsidiary of The Wellspring Group, Inc. The Wellspring Group is owned by Melissa Peirce and Amy Dain Vincelette, each with a 50% share. Melissa Peirce is the CEO and Managing Director of Wellspring Nurse Source. For our Health Care Services Pool license, we need to register both The Wellspring Group, Inc. and Wellspring Nurse Source, LLC. We filed a new registration for The Wellspring Group, Inc. as a foreign corporation in Florida, but inadvertently left off a DBA name as the name The Wellspring Group was taken. I spoke with Karen in your office today and was directed to resend the application with a DBA name and our filing number which is W17000088390.

Enclosed please find our revised application. Please contact Melissa Peirce at (877)756-0990 or [melissap@wellspringnursesource.com](mailto:melissap@wellspringnursesource.com) should you have any questions or require any additional information.

We appreciate your assistance.

Kindest regards,

*Melissa Peirce*

Melissa Peirce  
CEO and Senior Managing Partner

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Wellspring Group, 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:

Jay Peirce

Name of Person

The Wellspring Group, Inc.

Firm/Company

4 Research Drive, Suite 402

Address

Shelton, CT 06484

City/State and Zip code

jpeirce@wellspringgrp.com

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

For further information concerning this matter, please call:

Jay Peirce

978 887-8785  
at ( )

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:

- |  |   |  |   |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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. The Wellspring Group, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Wellspring Group Staffing, Inc.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Connecticut 3. 06-1622971  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/18/2001 5. NA  
(Date of incorporation) (Date of duration, if other than perpetual)
6. NA  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 4 Research Drive, Suite 402, Shelton, CT 06484  
(Principal office address)
- (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: CT Corporation System
- Office Address: 1700 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.

Carline Smith

Vice President & Assistant Secretary

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

**A. DIRECTORS**

Chairman \_\_\_\_\_

Address \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Melissa Peirce

Address: 4 Research Drive, Suite 402  
Shelton, CT 06484

Vice President: Amy Dain Vincelette

Address: 4 Research Drive, Suite 402  
Shelton, CT 06484

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: Jay Peirce

Address: 4 Research Drive, Suite 402, Shelton, CT 06484

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

12. Melissa Peirce \_\_\_\_\_

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. Melissa Peirce, Senior Managing Partner \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

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Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,  
DO HEREBY CERTIFY, that the certificate of incorporation of

THE WELLSPRING GROUP, INC.

a domestic STOCK corporation, was filed in this office on June 18, 2001, a certificate of dissolution  
has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of  
this office such corporation is in existence.



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Secretary of the State

Date Issued: October 13, 2017