

F17000005476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

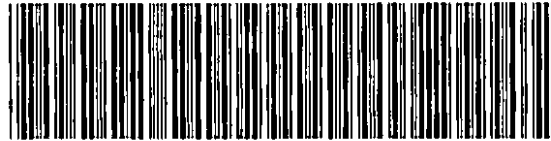
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NOTARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

DEC 06 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CentralBOS Employee Services, 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:

Stacy Giunta

Name of Person

CentralBOS LLC

Firm/Company

71 7th Ave, Apt. 1

Address

Brooklyn, NY 11217

City/State and Zip code

stacy.giunta@centralbos.com

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

For further information concerning this matter, please call:

Stacy Giunta

404

694-6095

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:

- ☐ \$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

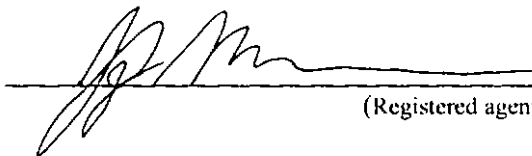
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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. CentralBOS Employee Services, 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. Delaware 3. 82-3461290
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. November 16, 2017 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. November 27, 2017
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3520 Piedmont Rd NE, Suite 360, Atlanta, GA 30305
(Principal office address)
- same as above
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Joseph P. Meyer
- Office Address: 901 NW 35th Street
- Boca Raton , Florida 33431
(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.

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

A. DIRECTORS

Chairman: Joseph P. Meyer

Address: 225 Seaspray Ave
Palm Beach, FL 33480

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Joseph P. Meyer

Address: 225 Seaspray Ave
Palm Beach, FL 33480

Vice President: _____

Address: _____

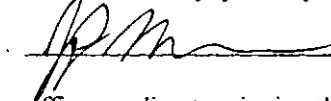
Secretary: Joseph P. Meyer

Address: 225 Seaspray Ave, Palm Beach, FL 33480

Treasurer: Joseph P. Meyer

Address: 225 Seaspray Ave, Palm Beach, FL 33480

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



Signature of Director or Officer

I, 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.

Joseph P. Meyer, CEO/President

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

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CLERK OF THE STATE
TALLAHASSEE, FLORIDA

Delaware

The First State


Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CENTRALBOS EMPLOYEE SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTRALBOS EMPLOYEE SERVICES, INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.




Jeffrey W. Bullock, Secretary of State

6619462 8300

SR# 20177248808

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203635115

Date: 11-27-17