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PICK-UP	☐ WAIT	MAIL		
(Bı	usiness Entity Name	)		
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Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				

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DEC 19 2017 J. HARRIS

### **COVER LETTER**

Division of Corporations
SUBJECT: Complete Stating Selutions Inc.  Name of corporation—must include suffix
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:
Anthony Martin
Name of Person
Complete Staffing Solutions Inc.
Complete Staffing Solutions Inc.
33 Boston Post Road West, Suite 240
Address
Marlboro, MA 01752  City/State and Zip code
City/State and Zip code
jolson a completes taffing solutions. com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jessia Olson at 508 460 - 6600  Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bigcup \text{\$570.00 Filing Fee} \text{\$\Bigcup \$78.75 Filing Fee} \text{\$\Bigcup \$78.75 Filing Fee} \text{\$\Bigcup \$Certificate of Status} \text{\$\Bigcup Certified Copy} \$\Bigcup Certified C

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

Com (Enter name of	plete Staffing Solution "CO	25 /176.	
			ting business in Florida)
Mar	sachusetts 3.	06-1655	986
	,		
(Da	te of incorporation) 5.	(Date of duration, if oth	er than perpetual)
	September 2	2017	
	(Date first transacted business in Florid	da, if prior to registration)	pility)
_ 33	Buston Pust Rd W Sc	» Je 240, 1	Mec. Thoro MA
	(Principal offi	ce address)	
<del></del>	(Current mailing add	ress, if different)	
Name and str	eet address of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	REGISTERED AGENTS INC.		<del>co</del> F
fice Address:	3030 N. Rocky Point Drive, STE 150A		
	TAMPA	, Florida 33607	Ö
	IUMILU	Florida 33007	60
	EGISTER A FO  COM (Enter name of "Inc.," "Co.," "  CS: (If name unava  Mac C (State or coun  (Da  Name and stre  Name:	EGISTER A FOREIGN CORPORATION TO TRANSACT BUSIN  Complete Staffing Solution  (Enter name of corporation; must include "INCORPORATED," "CO "Inc.," "Co.," "Corp.," "Inc." "Co.," or "Corp.")  CSS Placement Senius 1  (If name unavailable in Florida, enter alternate corporate name adopte  Macsachusetts 3.  (State or country under the law of which it is incorporated)  1111/02 5.  (Date of incorporation)  September 2  (Date first transacted business in Florid (SEE SECTIONS 607.1501 & 607.1502, F.  3 3 Buston Pust Rd W Staffing additional and street address of Florida registered agent: (P.O. Box Name: REGISTERED AGENTS INC.  Tice Address: 3030 N. Rocky Point Drive, STE 150A	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transaction of transaction of the purpose of transaction of trans

### 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.

Bill Havre/Secretary/Registered Agents Inc.

(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: Address: \_\_\_\_\_ Vice Chairman: Director: \_\_\_ Address: **B. OFFICERS** Vice President: Address: . Anthony Martin Secretary: \_\_\_\_ Address: \_\_\_\_ aborl Treasurer: aboute Address: \_\_\_ Cr S Samo NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) aftirms 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. \_\_\_\_ Anthony Mastin

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



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

December 7, 2017

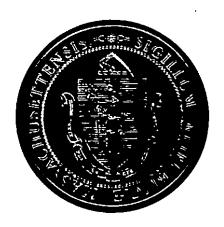
TO WHOM IT MAY CONCERN:

I hereby certify that

#### COMPLETE STAFFING SOLUTIONS INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on November 1, 2002.

I also certify that so far as appears of record here, said corporation still has legal existence.



In testimony of which,

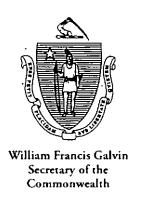
I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galicin



# The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

December 7, 2017

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office.

#### COMPLETE STAFFING SOLUTIONS INC.

is a domestic corporation organized on **November 1, 2002**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

William Travino Galicin

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