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PICK-UP	☐ WAIT	MAIL MAIL
		<u>—</u>
(Bı	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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May 25, 2018

LAUREL BRUCE 12460 CRABAPPLE RD #202-356 ALPHARETTA, GA 30004 US

SUBJECT: HORNET STAFFING, INC

Ref. Number: W18000050193

We have received your document for HORNET STAFFING, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 818A00011018

COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Hornet Staffing, 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: LAUYET BYUCE							
Name of Person Hornet Staffing, Inc. Firm/Company 12460 Crabappie Rd #202-356							
12460 Crabappie Rd #202-356							
Alpharetta, GA 30004 City/State and Zip code [Qurele hornets taffing. com							
Qurelehornetstaffing.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
LAWREL Bruce at (770) 355-6061							
Name of Person Area Code Daytime Telephone Number							
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314							
Tallahassee, FL 32301 Enclosed is a check for the following amount:							
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & B78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy							

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Hornet	Staffing, Inc.		
	tion - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but			
Please return all correspondence concerning this ma	atter to the following:		
Lourel	Bruce		
Name	of Person		
Hornet	Staffing, Inc.		
12460 Crabappie	Staffing, Inc. Company PA #202-356 ddress GA 30004 te and Zip code H5taffing. Conducted for future annual report notification)		
Alpharetta ?	GA 30004		
laurel@ horne	te and Zip code 157 affing. CON		
E-mail address: (to be us	sed for future annual report notification)		
For further information concerning this matter, plea	ise call:		
Laurel Bruce at 7.	70 355-6061 Code Daytime Telephone Number		
Name of Person Area (Code Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Building P.O. Box 6327			

Enclosed is a check for the following amount:

2661 Executive Center Circle

Tallahassee, FL 32301

S70.00 Filing Fee S87.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee,
Certificate of Status Certified Copy Certified Copy

Result Flat - Letter #8184000/1018

- Peqistered Agent 3190 attack

Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION REGISTER A FOREIGN CORPO	RATION TO TRANSACT L	BUSINESS IN THE ST	OWING IS SUBMIT. ATE OF FLORIDA.	TED TO
1. Hot	rnet staf	Ana Ir	~ .	
(Enter name of corporation; must i "Inc.," "Co" "Corp.," "Inc.," "Co."	include "INCORPORATED,"		PORATION,"	
(If name unavailable in Florida, en	iter alternate comomic none	adamad Carab		
GANTAI	, i	- ·	of transacting business i	n Florida) 7
(State or country under the law of	Swhich it is issues and 3.		2841278	<u> </u>
4. 9/13/		(FEI III	umber, if applicable)	
(Date of incorporation)			perual	
		(Date of durat	ion, if other than perpet	uai)
,cee cr	ate first transacted business in			
12460 Craba	SCTIONS 607.1501 & 607.15	F ROSA	inalty liability) SCII_6A	30075
10140 Araba	(Princip	pal office address)	4 4 1	
16960 Cravy	APIC UN	9102350	HIPha	setta, Gr
	(Current mailin	ig address, if different)	,	30004
				•
3. Name and <u>street address</u> of Flor	stered Ag	And Adding	HOOS TO	20
Name: Keg/	nered Hy	ETH Sold	MAD, LI	ر ا
Office Address: 155	Office Plan	ra Drive	, sure	4
Talla	hassee	32	7301	
1000	(City)	, Florida <u> </u>		
79 14 4 4	()	(2,50	ode)	
Registered agent's acceptance laving been named as registered		ce of process for the	have maded	tan newbort
esignatea in this application, I h	ereby accept the appointm	ient as registered aver	nt and agree to act in	this capacity I
uriner agree to comply with the p	provisions of all statutes re	elative to the proper a	nd complete perform	ance of my
uties, and I am familiar with and	i uccepi ine ootigations of	my position as regist	ered agent.	
\mathcal{I}_{1}	C			
delen	alu	Adan	n Saldana, Assistant S	ecretary
<u> </u>	(Registered a	gent's signature)	 .	
O. Attached is a certificate of exist the Department of State, by the Seconder the law of which it is incorpa	stence duly authenticated, cretary of State or other of	not more than 90 days	prior to delivery of the corporate records in	his application to
·				
				SSS.
			•	

A. DIRECTORS Chairman: Address: Director: Address: _ **B. OFFICERS** Vice President: Treasurer: Address: ___ 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) 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.

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

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



CONSENT TO SERVE AS REGISTERED AGENT

HORNET STAFFING, INC.

6/12/2018

RE:

I. Registered Agent Solutions, Inc., located at <u>155 Office Plaza Dr., Suite A, Tallahassee, FL 32301</u>, hereby consent to serve as Registered Agent for the above-referenced entity.

As Registered Agent it will be my responsibility to receive service of process; to forward all state and federal correspondence; and to immediately notify the Office of the Secretary of State in the event of our resignation, or of any changes in the Registered Office address.

<u>Jaclyn Wright, Assistant Secretary</u> Name and Title

Jackyn Wingst

Signature

Control Number: 16086311

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Hornet Staffing, Inc.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number | 15800766 Date Inc/Auth/Filed | 09/13/2016 Jurisdiction | Georgia Print Date | 05/21/2018

Form Number : 211



Brian P. Kemp Secretary of State