

FR000002957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

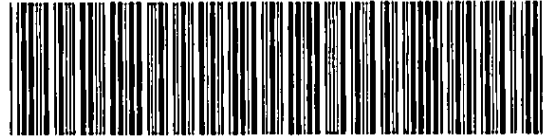
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900314720399

06/19/16--01011--030 **70.00

FILED
2016 JUN 25 AM 8:01
FALL ARIZONA

JUN 25 2016
J. HARRIS

W18-5-81M

COVER LETTER

TO: Registration Section
Division of Corporations
KEYPRO STAFFING SERVICES INC.

SUBJECT: _____
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:
RONALD CARR

Name of Person	
KEYPRO STAFFING SERVICES INC.	

1127 E GRAND AVE	Firm/Company
------------------	--------------

Address
ESCONDIDO, CA 92025

KEYPROSTAFF@GMAIL.COM

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

For further information concerning this matter, please call:

RONALD CARR	760	925-1441
-------------	-----	----------

Name of Person _____ at (_____) _____
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~~



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2018

RONALD CARR
1127 E GRAND AVE
ESDONDIDO, CA 92025

SUBJECT: KEY PRO STAFFING SERVICES INC.
Ref. Number: W18000057876

FILED
2018 JUN 25 AM 8:01
TALLAHASSEE, FLORIDA

We have received your document for KEY PRO STAFFING SERVICES 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return 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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 418A00012966

**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.*

KEYPRO STAFFING SERVICES INC.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. _____ 3. _____
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
SOUTH DAKOTA 81-5295704
(State or country under the law of which it is incorporated) (FEI number, if applicable)
02/08/2017
4. _____ 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)
1127 E GRAND AVE, ESCONDIDO CA 92025
7. _____
(Principal office address)
- _____ (Current mailing address, if different)

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

Name:

Florida Registered Agent LLC

Office Address:

3030 N. Rocky Point Dr. Suite 150 A

Tampa

(City)

Florida

33607

(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.

FILED
2016 JUN 25 AM 8:01
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

RONALD CARR

President: _____

Address: _____

Vice President: _____

Address: _____

RONALD CARR

Secretary: _____

Address: _____

RONALD CARR

Treasurer: _____

Address: _____

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.

RONALD CARR

13. _____

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

FILED
2018 JUN 25 AM 8:01
CLERK OF SUPERIOR COURT
JAN ALVARADO, CLERK

State of South Dakota

Office of the Secretary of State

Certificate of Good Standing

Domestic Business Corporation

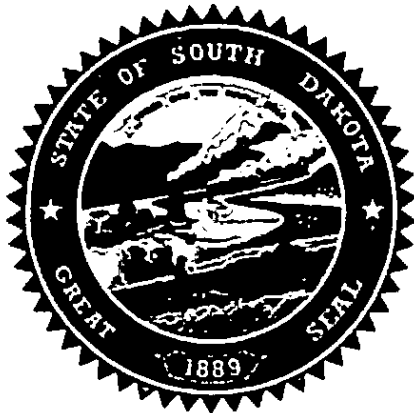
I, **Shantel Krebs**, Secretary of State of the State of South Dakota, hereby certify that

KeyPro Staffing Services, Inc.

Business ID: DB130444

was authorized to transact business in this state on: February 8, 2017.

I further certify that **KeyPro Staffing Services, Inc.** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, June 22, 2018.

Shantel Krebs

Shantel Krebs
Secretary of State

06/22/2018 12:09 PM

Verification #: 010793325