

FI9000001687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

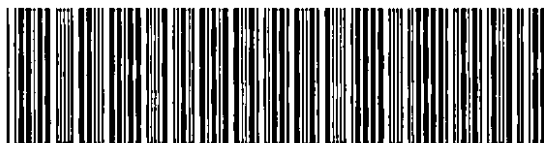
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APR 03 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 8, 2019

MARC GUZMAN
PO BOX 6759
BURBANK, CA 91510

SUBJECT: LOGIX EMPLOYMENT SERVICES INC
Ref. Number: W19000022339

(Handwritten signature)
2019 177-3
FILED

We have received your document for LOGIX EMPLOYMENT 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):

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 719A00004737

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOGIX EMPLOYMENT SERVICE 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:

MARC GUZMAN
Name of Person

LOGIX EMPLOYMENT SERVICE INC.
Firm/Company

PO BOX 6759
Address

BURBANK CA 91510
City/State and Zip code

MGUZMAN@LFCV.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARC GUZMAN at (818) 565-2068
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. LOGIX EMPLOYMENT SERVICES INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- LOGIX FEDERAL CREDIT UNION
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. CALIFORNIA 3. 95-4341911
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10 4 91 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. MARCH 3, 2019
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2340 N. HOLLYWOOD WAY BURBANK CA 91505
(Principal office address)
- _____
(Current mailing address, if different)

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

Name: JIMMY A. FLORES-HERNANDEZ

Office Address: 1432 S. W 44 TERR APT 2-A
FORT LAUDERDALE, Florida 33317
(City) (Zip code)

1 EMPLOYEE ONLY
NO REVENUE
WORKING FROM HOME
REMOTELY W/
CALIF OFFICE

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.

[Signature]
(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: ANA FONSECA

Address: 2340 N. HOLLYWOOD WAY BARBANK CA 91505

Vice Chairman: WAYNE SCHULMAN

Address: 2340 N. HOLLYWOOD WAY BARBANK CA 91505

Director: JULIE KIM

Address: 2340 N. HOLLYWOOD WAY BARBANK CA 91505

Director: _____

Address: _____

B. OFFICERS

President: ANA FONSECA

Address: 2340 N. HOLLYWOOD WAY BARBANK CA 91505

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12.  DIRECTOR
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. JULIE KIM DIRECTOR
(Typed or printed name and capacity of person signing application)

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

LOGIX EMPLOYMENT SERVICES, INC.

FILE NUMBER: C1698355
FORMATION DATE: 10/04/1991
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 26, 2019.

ALEX PADILLA
Secretary of State