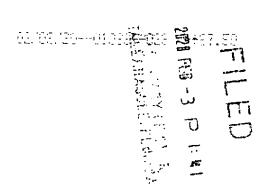
# F2000000843

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### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Advantage Group staffing	g Inc			
	me of corporation -	- must include suffix	-	
Dear Sir or Madam:				
The enclosed "Application by Foreign "Certificate of Existence," or "Certification above referenced foreign corporation	cate of Good Stand	ing" and check are subm		
Please return all correspondence conc	erning this matter t	o the following:		
Joseph Smith				
	Name of P	erson		
Advantage Group staffing Inc.				
	Firm/Comp	pany		
18121C E Hampden ave #168				
	Addres	is	<del></del>	
Aurora, Co 80013				
	City/State and	d Zip code		
Joe@addstaffing.com				
E-mail add	ress: (to be used fo	r future annual report no	tification)	
For further information concerning this	s matter, please ca	ll:		
Joseph Smith	800 at (	695-7599		
Name of Person	Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following a Please make check payable to: FLORIDA  \$70.00 Filing Fee \$78.75 F  Certifica	DEPARTMENT O	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate of Status &	

## 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.

Advantage Grou	p Staffing Inc				
	orporation; must include "INCORPC orp," "Inc," "Co," or "Corp.")	RATED," "C	COMPANY," "CORPORA	ATION,"	
(If name unavaik	ıble in Florida, enter alternate corpor	rate name ado	pted for the purpose of tran	sacting business in Florida)	
	·	·	• •	•	
(State or country 02/01/2002			(FEI number, if applicable)		
	of incorporation)	3	(Date of duration, if other than perpetual)		
	2/6/20 (Date first transacted b (SEE SECTIONS 607.1501	ousiness in Flo & 607.1502,	orida, if prior to registration F.S., to determine penalty	ı) liability)	
18121	Cateway dv. W (Prin C E. Hampdem	Velbor acipal office so the court of the cou	treet address)  168, Aurora  Identification	901 100 80013	
. Name and <u>stree</u> Name:	C E. Humpdem (Curr  t address of Florida registered ago Danielle Kimball  449 'ld Lovden Ave.	ent: (P.O. B	ox <u>NOT</u> acceptable)		
ffice Address:	449 'la Louden Ave.		_	<u> </u>	
	Dunedia (City)		_ , Florida <u>34<b>6</b>98</u> (Zip code)	_	
laving been name esignated in this orther agree to co	nt's acceptance: ed as registered agent and to acc application, I hereby accept the omply with the provisions of all s with and accept the obligations o	ept service o appointment tatutes relat	of process for the above : t as registered agent and ive to the proper and col	stated corporation at the pla l agree to act in this capacity	
_	Danielle Kin	wall agent's signar		<del></del>	

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS				
Chairman	Name:	□Chairman	Name: Ko	erri Smith
□Vice Chairman	Address: 14690 E Kenyon ave Aurora CO	■ Vice Chairman	Address:	14690 E Kenyon ave Aurora CC
□Director		Director		
President		□President		
□Vice President		□Vice President		
□Sceretary	<b>2</b> Treasurer	Secretary		□Treasurer
□Other	Other	□Other		□Other
□Chairman	Name:	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary		□Treasurer
□Other	Other	□Other		□Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman		
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	Secretary		□Treasurer
□Other	Other	□Other	<del>_</del>	□Other
12.	Use an attachment to report more than six (6). The added to the index when filing your Florida Departure of Direct Signature of Direct store circuity this document (and who is histed in pro-	rtment of State Annual Re , ひ or or Officer	eport form.	
she is aware that fa	etor signing this document (and who is listed in number of the December of the	partment of State constitu	tes a third o	degree felony as provided for in
13	(Typed or printed name and capacity of p	nerson signing application	)	

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

ADVANTAGE GROUP STAFFING INC.

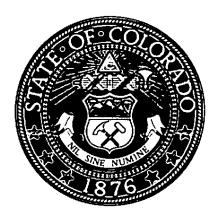
#### is a

#### Corporation

formed or registered on 12/19/2001—under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20011240127.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 01/30/2020 that have been posted, and by documents delivered to this office electronically through 01/31/2020 @ 13:14:10.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 01/31/2020 @ 13:14:10 in accordance with applicable law. This certificate is assigned Confirmation Number 12056781



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us.biz/Certificate/SearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click="Businesses, trademarks, trade names" and select "Frequently Asked Questions,"