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(((H22000323490 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

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Email Address: EFILE1234@INCFILE.COM

FOREIGN PROFIT/NONPROFIT CORPORATION WORLDWIDE RECRUITMENT SOLUTIONS, INC.

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COVER LETTER

TO:	Registration Sec Division of Cor					
CHB	JECT:	WORLDWIDE REC	RUITMEN	T SOLUTIONS, INC.		
SUD	, ECI.	Name of corpor	ration - mu	st include suffix		
Dear !	Sir or Madam:					
"Certi	ficate of Existence	ion by Foreign Corporations," or "Certificate of Good n corporation to transact b	l Standing'	`and check are subm		
Please	return all corresp	ondence concerning this n	natter to th	e following:		
LOVE	ETTE DOBSON					
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For fu	irther information	concerning this matter, ple	ease call:			
LOVI	ETTE DOBSON	at (at () 888-462-3453 Area Code Daytime Telephone Number			
***************************************	Name of Perso	n Area	Code	Daytime Teleph	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 Tallahassec, FL 32314			
Please		the following amount: c to: FLORIDA DEPARTN S78.75 Filing Fee & Certificate of Status	□ \$78	STATE .75 Filing Fee & rtified Copy	S87.50 Filin Certificate of Certified Co	of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA (((H22000323490 3)))

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.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in F (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (OU South Ashley Drive, Suite 280, Tampa, FL 33602 (Principal office street address) (Current mailing address, if different) Name: LEGALINC CORPORATE SERVICES INC. 476 RIVERSIDE AVE	
Delaware 3 (State or country under the law of which it is incorporated) (FEI number, if applicable)	
(State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (OS South Ashley Drive, Suite 280, Tampa, FL 33602 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: LEGALINC CORPORATE SERVICES INC.	Torida)
(Date of incorporation) (Date of incorporation) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (OU South Ashley Drive, Suite 280, Tampa, FL 33602 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: LEGALINC CORPORATE SERVICES INC.	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 100 South Ashley Drive, Suite 280, Tampa, Fl. 33602 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) LEGALINC CORPORATE SERVICES INC. 176 RIVERSIDE AVE	
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Name: LEGALINC CORPORATE SERVICES INC.	2022 5
Name:	_
ffice Address: 476 RIVERSIDE AVE	120
	P.
	1:07
$\frac{\text{JACKSONVILLE}}{\text{(City)}}, \text{ Florida} \frac{32202}{\text{(Zip code)}}$	0.7
Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation esignated in this application, I hereby accept the appointment as registered agent and agree to act in the arther agree to comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligations of my position as registered agent.	is capaci
Wesley Dolan (Registered agril'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.

9/20/2022 15:10:25 CDT A. DIRECTORS

Page (((П∠∠∪∪∪⊃∠Э4∀U Э)))

□Chairman	Name: Mark Richard Brown	□Chairman	Name: Francis Dunleavy	
□ Vice Chairman	Address:	□Vice Chairman	Address:	
Director	100 South Ashley Drive, Suite 280	Director	100 South Ashley Drive, Suite 280	
	Tampa, F1, 33602	□President	Tampa, FL 33602	
☐ Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	☐ Treasurer	
Other		☐Other	□Other	
∐Chairman	Thomas H. Thorelli Name:	□Chairman	Name:	
☐ Vice Chairman	Address:	□ Vice Chairman	Address:	
□Director	100 South Ashley Drive, Suite 280	☐ Director	<u> </u>	
□President	Tampa, FL 33602	□President	<u></u>	
□Vice President		□Vice President		
■ Secretary	□Treasurer	☐ Secretary	☐ Freasurer	
□Other	Other	Other	□Other	
□Chairman	Pippa Glendining	□Chairman	2022 C	
□Vice Chairman	Address:	□Vice Chairman	Address: 12	
DDirector	100 South Ashley Drive, Suite 280	□ Director	P	
	Tampa. FL 33602	□President		
□Vice President		□Vice President		.
□ Secretary	⊞ Treasurer	☐ Secretary	Treasurer	
COther	Other	□Other	□Other	
individuals may be	Ise an attachment to report more than six (6). The attachment to the index when filing your Florida Department of Director of	nt of State Annual Re		d —
The officer or direction is aware that fall s.817.155, F.S.	tor signing this document (and who is listed in number lise information submitted in a document to the Departi	(11 above) affirms th nent of State constitu	nat the facts stated herein are true and that hates a third degree felony as provided for in	ie or
13	Mark Richard Brown	ı - President		
_ 	(Typed or printed name and capacity of perso	n signing application	n)	

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Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WORLDWIDE RECRUITMENT SOLUTIONS, INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF SEPTEMBER,

A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WORLDWIDE RECRUITMENT SOLUTIONS, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

20 PI: 1:0

Authentication: 204413194

Date: 09-16-22