# F24000005365

(Requesto	or's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documer	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing (	Officer:
	<u> </u>





000436968710

**RECEIVED** 

SEP 3 0 2024



00T 1 5 2024 C. Brumbley



Toll-Free: 1.888.449.2638

1.805.449.2638

Email: info@CorpNet.com

8

www.CorpNet.com



September 24, 2024

Registration Section
Division of Corporations
2415 N. Monroe St., Suite 810
Tallahassee, FL 32303

RE: Reliance Staffing Inc.

To whom it may concern:

The Enclosed Application by Foreign Corporation and Fee(s) are submitted for filing along. Also, please find enclosed a check for state filing fees and a certified copy in the amount of \$78.75 made payable to the FL Dept of State. Please contact me for information needed in regards to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addressed stamped envelope included.

Sincerely,

Amanda J. Beren, Sr. Document Analyst CorpNet, Incorporated 888-449-2638 Ext. 105 filings@corpnet.com



## 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.

(If name unavail	able in Florida, enter alternate corporate	name adopted for the purpose of transacting business in Florida)
Texas		83-4684662
(State or countr	y under the law of which it is incorporate	ed) (FEI number, if applicable)
05/06/2019		5.
(Date	of incorporation)	5(Date of duration, if other than perpetual)
		ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)
5501 Headquarte	rs Dr #100W Plano, TX 75024	,, ,,,,
	(Princip	al office street address)
	(C.,	11: 11 10:1100
	(Current	mailing address, if different)
	(Current	mailing address, if different)
Name and stree	t address of Florida registered agent:	•
Name and stree		•
Name:	et address of Florida registered agent:	•
Name:	Registered Agents Inc. 7901 4th St N Ste 300	(P.O. Box NOT acceptable)
Name:	Registered Agents Inc. 7901 4th St N Ste 300 St. Petersburg	(P.O. Box <u>NOT</u> acceptable) Florida
Name:	Registered Agents Inc. 7901 4th St N Ste 300	(P.O. Box NOT acceptable)
Name:  ffice Address:  Registered age	Registered Agents Inc. 7901 4th St N Ste 300 St. Petersburg (City)	. Florida 33702 (Zip ccde)
Name: ffice Address: Registered age aving been nam	Registered Agents Inc. 7901 4th St N Ste 300 St. Petersburg (City) ent's acceptance: ed as registered agent and to accept	(P.O. Box NOT acceptable)  . Florida 33702 (Zip ccde)  service of process for the above stated corporation at the
Name: fice Address:  Registered age aving been nam signated in this	Registered Agents Inc.  7901 4th St N Ste 300  St. Petersburg  (City)  ent's acceptance:  ed as registered agent and to accept application, I hereby accept the app	(P.O. Box NOT acceptable)  . Florida 33702 (Zip ccde)  service of process for the above stated corporation at the pointment as registered agent and agree to act in this capa
Name: fice Address:  Registered age aving been nam signated in this rther agree to co	Registered Agents Inc.  7901 4th St N Ste 300  St. Petersburg  (City)  ent's acceptance:  ed as registered agent and to accept application, I hereby accept the app omply with the provisions of all state	(P.O. Box NOT acceptable)  Florida 33702  (Zip ccde)  service of process for the above stated corporation at the pointment as registered agent and agree to act in this capa actes relative to the proper and complete performance of m
Name:  ffice Address:  Registered age aving been nam isignated in this rther agree to co	Registered Agents Inc.  7901 4th St N Ste 300  St. Petersburg  (City)  ent's acceptance:  ed as registered agent and to accept application, I hereby accept the app	(P.O. Box NOT acceptable)  Florida 33702  (Zip ccde)  service of process for the above stated corporation at the pointment as registered agent and agree to act in this capa actes relative to the proper and complete performance of m
Name:  ffice Address:  Registered age aving been names ignated in this rther agree to co	Registered Agents Inc.  7901 4th St N Ste 300  St. Petersburg  (City)  ent's acceptance:  ed as registered agent and to accept application, I hereby accept the app omply with the provisions of all state	(P.O. Box NOT acceptable)  The initial state of process for the above stated corporation at the pointment as registered agent and agree to act in this capa attes relative to the proper and complete performance of many position as registered agent.

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

#### A. DIRECTORS Vincent Guerrero Chairman Chairman Name: 5501 Headquarters Dr #100W □Vice Chairman Address: Address: \_\_\_\_\_ □Vice Chairman Plano, TX 75024 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 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 Address: \_\_\_\_ ☐ Director Director ☐ President ☐ President □ Vice President □ Vice President ☐ Secretary Treasurer □ Secretary Treasurer □Other \_\_\_\_\_ □ Other \_\_\_\_\_ □Other □Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Vincent Guerrero, President 13.

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



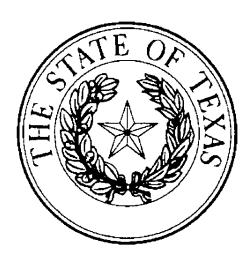
### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Reliance Staffing Inc. (file number 803310951), a Domestic For-Profit Corporation, was filed in this office on May 06, 2019.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 09, 2024.



gave Helson

Jane Nelson Secretary of State