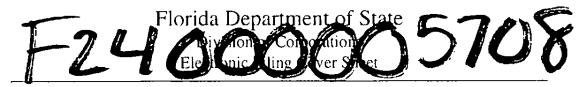
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(((H24000363029 3)))



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From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

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FOREIGN PROFIT/NONPROFIT CORPORATION STAFF PLUS, INC.

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COVER LETTER

TO: Registration Son Division of Co				
SUBJECT: STAI	FF PLUS, INC.			
	Name of corpora	tion - must i	nclude suffix	
Dear Sir or Madam:				
"Certificate of Existen	ation by Foreign Corporation ce," or "Certificate of Good S gn corporation to transact bus	Standing" an	d check are submitte	
Please return all corres	pondence concerning this ma	itter to the fo	ollowing:	
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_EFILE1234@	DINCFILE.COM E-mail address: (to be use	ad Can Carre		
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For further information	i concerning this matter, plea	se call:		
LOVETTE DO	DRON 1	88	88-462-3453	
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Registration Solution of Co The Centre of	orporations Tallahassee oc Street, Suite 810		MAILING ADDI Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 33	on rations
	r the following amount: ble to: FLORIDA DEPARTME \$\infty\$ \$78.75 Filing Fee & Certificate of Status	□ \$78.75		\$87.50 Filing Fee, Certificate of Status & Certified Copy

11/1/2024 10:15:03.CDT . Page: 3/5

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA (((H24000363029 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.

z. <u>Texas</u>		3(FEI number, if ap	
(State or count) 4. 09/02/200	y under the law of which it is incorporated)	5. Perpetual	opiicaole)
'' <u></u>	of incorporation)	(Date of duration, if other	than perpetual)
5.			
· ·		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liabil	ity)
₇ 1079 W. F	Round Grove Rd. Suite 3		
		office street address)	
	/Company was	illing address, if different)	
	(Cantent ma	ning address, if different	- 2
R. Name and stree	<u>et address</u> of Florida registered agent: (l	P.O. Box NOT acceptable)	ANG A
Name:	street address of Florida registered agent: (P.O. Box NOT acceptable) e: REPUBLIC REGISTERED AGENT LLC		1000円 円子
Office Address:	1150 Nw 72nd Ave Tov	<u>wer 1</u> Ste 455	
	Miami	. Florida <u>33126</u> (Zip code)	1: 09
	(City)	(Zip code)	O
	ent's acceptance:		
	ed as registered agent and to accept se application. I hereby accept the appoin	rvice of process for the above state ntment as registered agent and agr	
lesignated in this	ministration of a state and the appropriate and appropriate an		

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.

11/1/2024 10:15:02 CDT A. DIRECTORS

A. DIRECTORS	ick Barnett	_	(((H24000363029 3))) _{Name:} Melissa Barnett			
	***************************************	□ Chairman				
-	704 Pacer Way	□ Vice Chairman	Address: 1079 W. Round Grove Rd			
&Director Flower	r Mound, TX 75028	□Director	Suite 300-422			
≲ President		☐ President	Lewisville, TX 75067			
□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	Coccicialy	□Treasurer			
□Other	Other	Other	□Other			
DChairman Name:		Dol.	Name:			
		□Chairman □Vice Chairman	Address:			
DDirector		Director	Address.			
* .		President				
		□ Vice President				
☐ Secretary	□Treasurer	□ Secretary	Treasurer			
Other	□Other	□Other	Other			
Important Notice: Use an attachn individuals may be added to the i	: nent to report more than six (6). The att index when filing your Florida Departn	achment will be imaged ent of State Annual Re	I for reporting purposes only, Non-indexed port 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. Erick Barnett - President						

11/1/2024 10:15:03 COT . Page: 5/5

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



Jane Nelson Secretary of State (((H24000363029 3)))

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for STAFF PLUS, INC. (file number 800540211), a Domestic For-Profit Corporation, was filed in this office on September 02, 2005.

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 Scal of State at my office in Austin, Texas on October 30, 2024.



Phone, (512) 463-5555

Prepared by: SOS-WEB

Jane Melson

Jane Nelson Secretary of State

(((H24000363029 3)))

TID: 10264

Dial: 7-1-1 for Relay Services Document: 1418843390002