

F990000006294

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: MPD PERSONNEL, 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", 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: **600003060426--2**

-12/03/99-01088-007
*****87.50 *****87.50

DOUGLAS MCCARTY
(Name of Person)

MPD PERSONNEL, INC.
(Firm/Company)

PO BOX 1380
(Address)

LAKE WORTH, FL 33460
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

DOUGLAS MCCARTY at (561) 588-0440
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DB
12-7-99

**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. MPD PERSONNEL, INC.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. ALABAMA

(State or country under the law of which it is incorporated)

3. 63-1132108

(FEI number, if applicable)

4. DECEMBER 2, 1994

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. DECEMBER 1, 1999

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. PO BOX 1380

LAKE WORTH, FL 33460

(Current mailing address)

TO DO ANY AND ALL OF THE THINGS NATURAL PERSONS MIGHT OR COULD DO

8. TO ENGAGE IN BUSINESS PERMITTED UNDER THE LAWS OF U.S.A and the state of FLORIDA

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: DOUGLAS MCCARTY

Office Address: 1617 N. FEDERAL HWY

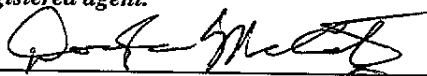
LAKE WORTH

, Florida, 33460

(Zip code)

10. 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.



(Registered agent's signature)

11. 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.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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SECRETARY OF STATE
TALLAHASSEE, FL 32304

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: RICHARD VONDRAK

Address: 1617 N. FEDERAL HWY
LAKE WORTH, FL 33460

Vice Chairman: _____

Address: _____

Director: DOUGLAS MCCARTY

Address: 1617 N. FEDERAL HWY
LAKE WORTH, FL 33460

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: RICHARD VONDRAK

Address: 1617 N. FEDERAL HWY
LAKE WORTH, FL 33460

Vice President: _____

Address: _____

Secretary: DOUGLAS MCCARTY

Address: 1617 N. FEDERAL HWY
LAKE WORTH, FL 33460

Treasurer: TRAVIS M. HAWKINS

Address: 364 BOURGEOIS CIR
MOBILE, AL 36609

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

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. DOUGLAS MCCARTY SECRETARY

(Typed or printed name and capacity of person signing application)

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that MPD Personnel, Inc., a close corporation incorporated in Mobile County, Mobile, Alabama on December 2, 1994. I further certify that the records do not disclose that said MPD Personnel, Inc., a close corporation has been dissolved.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

October 22, 1999

Date

Jim Bennett

Jim Bennett

Secretary of State