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SECRETARY OF STATE
ALL AHASSEF FLORIDA

M. THOMAS

DEC 2 2 2009

**EXAMINER** 

#### **COVER LETTER**

то:	Registration Section Division of Corporations
SUBJ	STAFFING ADVANTAGE, L.L.C.  Name of Limited Liability Company
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of nee, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please	return all correspondence concerning this matter to the following:
	Lisa Granskie on behalf of Incorp Services, Inc.  Name of Person
	Incorp Services, Inc. Firm/Company
	Henderson, NV 89014-8909 City/State and Zip Code
For fu	City/State and Zip Code    Iisa.granskie@incorp.com   Code   Code
10.10	Lisa Granskie for Incorp Services, Inc. at ( 702 ) 866-2500 x6508  Name of Person Area Code & Daytime Telephone Number  MAILING ADDRESS: STREET ADDRESS: Division of Corporations Registration Section Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclo	sed is a check for the following amount:  \$\sum_{125.00}\$ \text{Filing Fee} \sum_{130.00}\$ \text{Filing Fee & Certificate of Status} \sum_{155.00}\$ \text{Filing Fee & S160.00 Filing Fee, Certificate of Status} \text{Certified Copy}

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. STAFFING ADVANTAGE, L.L.C.  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writ consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	tei
2. North Carolina (Jurisdiction under the law of which foreign limited liability company is organized)  3. 20 - 20248/4 (FEI number, if applicable)	
4. 1/13/2005 5. Perpetual  (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. Upon Filing  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)	Ī
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 2268 James B. White Hwy. N.  Whiteville, N.C. 28472  (Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here	1
(Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or managers are as follows:  RANDAL GORE 2268 dames B. While Hwy. N. While NC 28472	
T.E. Gore 2268 James B. White Hwy. N. Whiteville, NC 28472	
Sanora Gure 2268 dames B. White Hwy. N. Whiteville, NC 28472	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)	s ir
11. Nature of business or purposes to be conducted or promoted in Florida: Personne /	
Staffing.	
Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	

Typed or printed name of signee

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
STAFFING ADVANTAGE, L.L.C.
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Incorp Services, Inc. (Name)  Incorp Services, Inc. (Name)
Torida Street Address (P.O. Box NOT ACCEPTABLE)
Loxahatchee FL 33470 City/State/Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.    Anice   Chapter   Combehalf of the corp   Senvices, Inc.
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

Certified Copy (optional)
Certificate of Status (optional)

\$ 25.00 \$ 30.00

\$ 5.00



## NORTH CAROLINA Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### STAFFING ADVANTAGE, L.L.C.

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 13th day of January, 2005, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 9th day of December, 2009.

6 laine I. Marshall

Secretary of State