(Requestor's Name) (Address) (Address)	200296947652			
(City/State/Zip/Phone #)	03/28/1701029029 **130.00			
fied Copies Certificates of Status ecial Instructions to Filing Officer:	17 HAR 28 PH & 50			
Office Use Only	mar 2 9 2017			

### **COVER LETTER**

го:	<b>Registration Section</b>			
	Division of Corporations			

SUBJECT:

Career Employment Professionals, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, 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:

Lynda Neal

Name of Person

HunterMaclean

Firm/Company

200 East Saint Julian Street

Address

Savannah, Georgia 31401

City/State and Zip Code

Lneal@huntermaclean.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lynda Neal		912 at (	231-296	9
Name o	f Contact Person	Area Code	Dayti	ime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		<ul> <li>STREET ADDRESS:</li> <li>Division of Corporations Registration Section Clifton Building</li> <li>2661 Executive Center Circle Tallahassee, FL 32301</li> </ul>		of Corporations on Section alding cutive Center Circle
Enclosed is a check for the follow <b>125.00</b> Filing Fee	ing amount: ■ \$130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	ng Fee &	S160.00 Filing Fee, Certificate of Status & Certified Copy
Places the Co enclos	e return a f stificate g S sol Fel 4 s Shark y	file copy thetes in envelope	and the	
	Fhank y	Ju.		

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

#### , Career Employment Professionals, LLC

(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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")

2. Georgia	3			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)		
4. March 15, 2017				
···	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to det	rior to registration.) ermine penalty liability)		
5. <u>702 Mall Blvd.</u>				
Savannah, Georgia 314	406			
	(Street Address of Principal Office)			
6. 702 Mall Blvd.		. <u> </u>		
Savannah, Georgia 314	406			
	(Mailing Address)			
7. Name and street addres	as of Florida registered agent: (P.O. Box NOT a	cceptable)		
Name:	Pam Cole Grimes			
Office Address:	9550 Regency Square Blvd., Suite 100		1	
	Jacksonville	, Florida	HAR	, . 
	(City)	(Zip code)	NO NO	
Registered agent's accep				
Having been named as re	gistered agent and to accept service of process	for the above stated limited liability	ty company at the place	1
to complywith the provisi	tion, I hereby accept the appointment as register ons of all statutes relative to the proper and con	nplete performance of my dutles.	and I am familian with	and

d:1

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Pam Cole Grimes, Manager

accept the obligations of my position as registered agent.

702 Mall Blvd.

Savannah, Georgia 31406

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Pam Cole Grimes

Control Number : H703023

## **STATE OF GEORGIA**

## Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

### **CERTIFICATE OF EXISTENCE**

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### CAREER EMPLOYMENT PROFESSIONALS, LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

·· . ,

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence of is authorized to transact business in this state.

Docket Number Date Inc/Auth/Filed Jurisdiction Print Date Form Number : 14294927 : 04/06/1977 : Georgia : 03/22/2017 : 211



Brian P. Kemp Secretary of State