

MIB060000298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

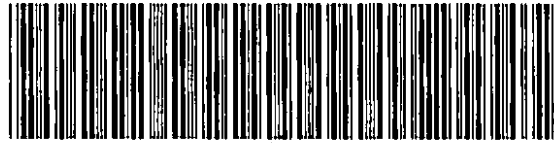
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900307055959

01/10/18--01010--001 **125.00

FILED
2018 JAN 10 A 11:06
CLERK OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
JAN 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: On Time Staffing, 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:

Stu Sklar

Name of Person

On Time Staffing, LLC

Firm/Company

535 Route 38 East, Suite 412

Address

Cherry Hill, NJ 08002

City/State and Zip Code

ssklar@otsholdings.com

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

For further information concerning this matter, please call:

Stu Sklar

at (856) 270-6190

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
2013 JAN 10 A 11:06
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. On Time Staffing, 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. New Jersey

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 71-0925894

(FBI number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 535 Route 38 East, Suite 412

(Street Address of Principal Office)

Cherry Hill, NJ 08002

6. 535 Route 38 East, Suite 412

(Mailing Address)

Cherry Hill, NJ 08002

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hayes Street

Tallahassee


(City)

, Florida 32301

(Zip code)

Registered agent's acceptance:

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 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)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Brian Kares, CEO

535 Route 38 East, Suite 412

Cherry Hill, NJ 08002

Don Sullivan, CFO

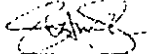
535 Route 38 East, Suite 412

Cherry Hill, NJ 08002

(Use attachments if necessary)

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)

10. 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.


Signature of an authorized person

Stuart Sklar

Typed or printed name of signer

FILED
2011 JAN 10 AM 11:08
CLERK OF COUNTY CLERK
CLERK OF COUNTY CLERK
CLERK OF COUNTY CLERK

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
LONG FORM STANDING WITH CHARTER DOCUMENTS

ON TIME STAFFING, LLC
0600157704

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on December 24, 2002.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

STU SKLAR
OTS HOLDINGS, INC.
535 RT. 38 EAST, SUITE 412
CHERRY HILL, NJ 08002

I further certify that as of the date of this certificate, the following amendments and changes are on file in this office:

RESIGNATION OF AGENT	05/18/2005
CHANGE OF AGENT AND OFFICE	03/27/2007
CHANGE OF AGENT AND OFFICE	05/05/2009
CHANGE OF AGENT AND OFFICE	06/07/2012
CHANGE OF AGENT AND OFFICE	03/04/2013
Annual Report filing with officer/member change	01/01/2015
CHANGE OF AGENT AND OFFICE	09/23/2015
Annual Report filing with officer/member change	10/30/2016

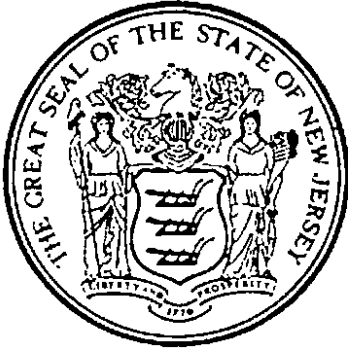
FILED

2018 JAN 10 A 11:06

SECRETARY OF TREASURY
TALLAHASSEE, FL 32310

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
LONG FORM STANDING WITH CHARTER DOCUMENTS

ON TIME STAFFING, LLC
0600157704



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
28th day of December, 2017

A handwritten signature in black ink, appearing to read "Ford M. Scudder".

Ford M. Scudder
Acting State Treasurer

Certificate Number : 6085003386

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

FILED
2018 JAN 10 A 11:06
CLERK OF STATE
TALLAHASSEE, FLORIDA