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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

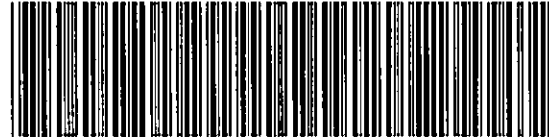
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 OCT -4 PM 3:31

[Signature]
10/16/18

Georgetown Professionals LLC

DBA Affordable Staffing



October 1, 2018

Division of Corporations,

Enclosed you will find our application to register our company, Georgetown Professionals LLC, to transact business in the state of Florida. We have also enclosed the certificate of existence from the state of Delaware, and a check in the amount of \$125.00 to cover the filing fees. If you have any questions, please feel free to contact me directly at 508-574-3370.

Thank you for your time and assistance.

Very Respectfully,

A handwritten signature in black ink that reads "Jonathan Swisher".

Jonathan Swisher, Vice President, COO
Georgetown Professionals LLC
d/b/a Affordable Staffing
955 Lynn Circle
Ormond Beach, FL 32176

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Georgetown Professionals LLC, DBA, Affordable Staffing
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:

Judith A. McBride

Name of Person

Georgetown Professionals LLC, DBA, Affordable Staffing

Firm/Company

955 Lynn Circle

Address

Ormond Beach, FL 32176

City/State and Zip Code

judy@georgetownprofessionals.com

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

For further information concerning this matter, please call:

Jonathan Swisher

508

574-3370

at ()

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

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. Georgetown Professionals LLC, DBA Affordable Staffing
(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. Deleware 3. 87-0758427
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 10/01/2018
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 955 Lynn Circle 6. 955 Lynn Circle
(Street Address of Principal Office) (Mailing Address)
Ormond Beach, FL 32176 Ormond Beach, FL 32176
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Rose M. Berger
- Office Address: 955 Lynn Circle
Ormond Beach Florida 32176
(City) (Zip code)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 OCT -4 PM 3:31

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.

Rose M. Berger
(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:
<u>Member</u>	<u>Judith A. McBride</u> <u>955 Lynn Circle</u> <u>Ormond Beach FL 32176</u>		
<u>Member</u>	<u>Jonathan P. Swisher</u> <u>955 Lynn Circle</u> <u>Ormond Beach FL 32176</u>		

(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.

Judith A. McBride
Signature of an authorized person
Judith A. McBride
Typed or printed name of signer

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "GEORGETOWN PROFESSIONALS LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2018.




Jeffrey W. Bullock, Secretary of State

4087206 8300

SR# 20186850585

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203501274

Date: 09-26-18