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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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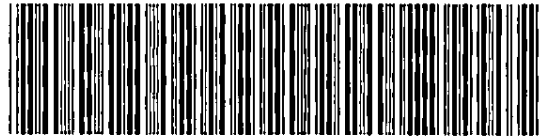
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

UJS
12-5-18

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 512281 7536595

AUTHORIZATION :

COST LIMIT : \$ 130.00

ORDER DATE : December 3, 2018

ORDER TIME : 1:26 PM

ORDER NO. : 512281-005

CUSTOMER NO: 7536595

FOREIGN FILINGS

NAME: CROWLEY PERSONNEL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Crowley Personnel, 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:

Reece B. Alford

Name of Person

Crowley Maritime Corporation

Firm/Company

9487 Regency Square Blvd. N.

Address

Jacksonville, FL 32225

City/State and Zip Code

reece.alford@crowley.com

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

For further information concerning this matter, please call:

Reece B. Alford

904

727-1978

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. Crowley Personnel, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Delaware 3. 83-2651852
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Business will commence on January 1, 2019.
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8200 Nations Way 6. 9487 Regency Square Blvd. N.
(Street Address of Principal Office) (Mailing Address)
Jacksonville, FL 32256 Jacksonville, FL 32225

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (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.

By: Emily Croft Emily Croft
(Registered agent's signature) Asst. Vice President

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:
See attached			

(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.

Reece B. Alford
Signature of an authorized person

Reece B. Alford, Assistant Secretary
Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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

CROWLEY PERSONNEL, LLC

ATTACHMENT A - SUPPLEMENTAL INFORMATION

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

Title or Capacity	Name	Address
Manager	Thomas B. Crowley, Jr.	9487 Regency Square Blvd. N. Jacksonville, FL 32225
Manager	William A. Pennella	(same as above)
Manager	Michael G. Roberts	(same as above)
Senior Vice President	Carl R. Fox	(same as above)
Treasurer	Daniel L. Warner	(same as above)
Assistant Treasurer	Bryan C. Smith	(same as above)
Assistant Treasurer	Norman S. Himes, Jr.	(same as above)
Assistant Treasurer	Jennifer P. Legg	(same as above)
Assistant Treasurer	Richard D. Lamb, Jr.	(same as above)
Secretary	Michael G. Roberts	(same as above)
Assistant Secretary	Reece B. Alford	(same as above)
Assistant Secretary	Kerri A. McClellan	(same as above)
Assistant Secretary	Arthur F. Mead, III	(same as above)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CROWLEY PERSONNEL, 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 THIRD DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CROWLEY PERSONNEL, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



7166684 8300

SR# 20187935913

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204013774

Date: 12-03-18