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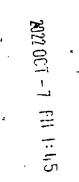
| (Requestor's Name) |
|---|
| |
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| |

Office Use Only



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S. ROBERTS

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COVER LETTER

| | Registration Section Division of Corporations | | | | | | |
|-------------|---|--|--|--|--|--|--|
| SUBJEC | Cejka Search, LLC T: | | | | | | |
| | Name of Limited Liability Company | | | | | | |
| | | Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Florida | | | | | |
| Please ret | urn all correspondence concerning this matter t | to the following: | | | | | |
| | Susan Ball | | | | | | |
| | | Name of Person | | | | | |
| | Cross Country Healtheare, Inc. Firm/Company 6551 Park of Commerce Blvd. | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Address | | | | | | | |
| | Boca Raton, FL 33487 | | | | | | |
| | (| City/State and Zip Code | | | | | |
| | sball@crosscountry.com | | | | | | |
| | E-mail address: (to b | e used for future annual report notification) | | | | | |
| For further | er information concerning this matter, please ca | alt: | | | | | |
| Angela Long | | 561 617-2685 at () | | | | | |
| - | Name of Contact Person | at () Area Code Daytime Telephone Number | | | | | |
| _ | Mailing Address: Registration Section | Street Address: Registration Section | | | | | |
| | Division of Corporations | Division of Corporations | | | | | |
| | P.O. Box 6327 | The Centre of Tallahassee | | | | | |
| • | Tallahassee, FL 32314 | 2415 N. Monroe Street, Suite 810 | | | | | |
| | | Tallahassee, FL 32303 | | | | | |
| | Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEI | PARTMENT OF STATE | | | | | |
| | ■ \$125.00 Filing Fee □ \$130.00 Filing Fe Certificate | ee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate | | | | | |

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. Cejka Search, LLC | | | | | |
|---|--|----------------------------------|--|------------------------------------|--|
| (Name of Foreign | Limited Liability Company; must include "Limited | I Linbility (| Company," "L.L.C.," or "LLC.") | | |
| If name unavailable, enter alternate r | name adopted for the purpose of transacting business in Flo | orida. The att | ernate name must include "Limited Lia | bility Company," "L.L.C," or "LL.C | |
| Delaware (Jurisdiction under the law of which foreign limited liability company is organized) | | 3 | 04-3418038 3 | | |
| | | J | (FEI numbe | (FEI number, if applicable) | |
| J | | | | | |
| | (Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine | registration.) ne penalty lia | bility) | | |
| 6551 Park of Commerce Blvd. | | | 551 Park of Commerce Blv (Mailing Address) | d. | |
| | | | (Mailing Address) | | |
| Boca Raton, FL 33487 | | B | oca Raton, FL 33487 | 53 | |
| | | | | 1 · | |
| Nows and street address | a of Placida anxietand annu (D.O. Pau | NOT | | 1 | |
| . Name and <u>street addres</u> | <u>s</u> of Florida registered agent: (P.O. Box | NOT ac | сертавіе) . | 7 | |
| Name: | Corporation Service Company | | | | |
| Office Address: | 1201 Hays Street | | <u> </u> | . 01 | |
| | Tallahassee | | 32301 . Florida | | |
| | ··· (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.

(Registered agent's signature) Wick Prosidut

Susan Ball

| | Name and Address: | Title or Capacit | Name and Address: |
|-------------|--------------------------------------|------------------|-------------------|
| □Manager | Name: Cross Country Staffing, Inc. | □Manager | Name: |
| ■Member | Address: 6551 Park of Commerce Blvd. | □Member | Address: |
| □Authorized | Boca Raton, FL 33487 | □Authorized | |
| Person | | Person | |
| Other | Other | □Other | □Other_ |
| ∐Manager | Name: | □Manager | Name: |
| □Member | Address: | □Member | Address: |
| □Authorized | | □Authorized | |
| Person | | Person | |
| Other | Other | □Other | Other |
|]Manager | Name: | □Manager | Name: |
| □Member | Address: | □Member | Address: |
| ☐Authorized | | □Authorized | |
| Person | | Person | |
| □Other | □Other | □Other | Other |

Typed or printed name of signee





Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CEJKA SEARCH, 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 OCTOBER, A.D. 2022.

TANK TO THE PARTY OF THE PARTY

Authentication: 204538576

Date: 10-03-22