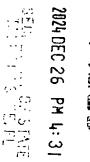
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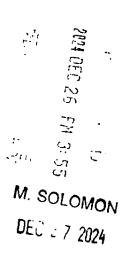
(Re	equestor's Name)	_
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name))
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 766432 7879049

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: November 14, 2024

ORDER TIME : 10:45 AM

ORDER NO. : 766432-070

CUSTOMER NO: 7879049

FOREIGN FILINGS

NAME: BBSI STAFFING SERVICES, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER: _____

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

BBSI Staffing Service			
(Name of Foreign	Limited Liability Company, must include "Limite	d Liability Company," "L.L.C.," or "LLC.")	
une unavallable, enter alternate n	ame adopted for the purpose of transacting business in F	lorida. The alternate name must include "Limited Liability of	Company," "L.L.C," or "LLC.")
Vashington		33-1321655 3.	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3(FEI munber, if ap	pplicable)
		·	
			-
	(Date first fransacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) ine peralty liability)	
8100 NE Parkway Drive, Sulte 200,		8100 NE Parkway Drive, Sulte	200,
et Address of Principal Office)		6. (Mailing Address)	2021
Vancouver, WA 98662		Vancouver, WA 98662	+ DEC
			26
Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	ESPA 3
Name:	Corporation Service Company		L:1 —
Office Address:	1201 Hays Street		
	Tailahassee	32301 . Florida	
	(City)	(Zip code)	<u>.</u>

Title or Capacity:	Name and Address:	Title or Capacit	<u>.v:</u>	Name and Addres	is:
■Manager	Name: Anthony Harris	_ □ Manager	Name:		
□Member	Address:	□Member	Address:		
□Authorized	8100 NE Parkway Drive, Suite 200	□Authorized			
Person	Vancouver, WA 98662	Person	·		
Other	Other_	□Other		□Other	
□Manager	Name:	□Manager	Name:	2824 	
□Member	Address:	□Member	Address:		(1)
□Authorized		□Authorized			
Person		Person			
□Other	Other	Other			
□Manager	Name:	□Manager	Name:	·	
□Member	Address:	□Member	Address:		
□ Authorized		_			
Person		Person			
□Other	Other	□Other		□Other	
9. Attached is a cert jurisdiction under the of the translator must 10. This document	ise an attachment to report more than six (6 may be added to the index when filing you ifficate of existence, no more than 90 days to law of which it is organized. (If the certist be submitted) is executed in accordance with section 605 ment to the Department of State constitutes	or Florida Department of Stoler, duly authenticated by the ficate is in a foreign languation (1) (b), Florida Statut	ate Annual Rep he official havi ge, a translation tes. I am aware	ort form. ng custody of records n of the certificate und that any false informat	in the ler oath

Typed or printed name of signee

CSC 766432



Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF.

BBSI STAFFING SERVICES, LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 10/02/2024.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

> Issued Date: 12/19/2024 UBI Number: 605 612 770

ten R Hobbie

- 333333

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State

Date Issued: 12/19/2024