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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: Florida Nersing Consultants & Recruiters, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

□ \$78.75
Filing Fee
& Certified Copy

□ \$87.50 Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Jack Jacobs
Name (Printed of typed)

9221 S. Brittany
Address

Inverness, FL 34452
City, State & Zip

352-8637-4400

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Florida Nursing Consultants & Receviter	's Ir
2. The principal place of business and mailing address of the corporation is: 9221 South Britary Path, Inverses, FL, 34452	
3. The corporation shall have the authority to issue shares of stock.	
4. The registered agent of the corporation is	
5. The initial Board of Directors shall have <u>a</u> member(s) whose name(s) and address(es) is/are as follows: <u>Tick & Margarita Jacobs</u>	
The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.	!
6. The incorporator of this corporation is <u>Jack Jacobs</u> whose street address is <u>9221 S. Brittany Path</u> , <u>Inverness</u> , <u>FL - 34452</u>	; 7,7 ,
Dated //- 9 - 2002 Dated //- 9 - 2002 Dated //- 9 - 2002	FI FD
Lincorpærator Pin 19	ı

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Registered Agent