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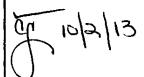


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13 SEP 30 PM 2: 38

FILED SECRETALY OF STATE NVISION OF SORPORATIONS



## **COVER LETTER**

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

SUBJECT: Fro	nt Line Staffing, (PROPOSED CORPOR	COP. ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: B	arbara A Horner		
	Nam	e (Printed or typed)	
9(	09 SE 24th St.		
<del></del>		Address	· · · · · · · · · · · · · · · · · · ·
С	ape Coral, FL 33	3990	ದ
	City	, State & Zip	SE
2:	39-574-2140		3 SEP 30
	Daytime '	Telephone number	

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

frontlinestaffing1@yahoo.com

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

HECENED HILLON

September 12, 2013

BARBARA A HORNER 909 SE 24TH STREET CAPE CORAL, FL 33990

SUBJECT: FRONT LINE STAFFING, CORP.

Ref. Number: W13000050500

We have received your document for FRONT LINE STAFFING, CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 713A00021486

13 SEP 30 PM 2: 38

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

, , , , , , , , , , , , , , , , , , ,	In compliance with Chapter 607 and/	SECRETARY OF STATE.
The name of the corporat	E Front Line Staffing	,
ARTICLE II PRI	NCIPAL OFFICE Principal street address	13 SEP 30 PM 2: 38  Mailing address, if different is:
909 SE 24th St.	Cape Coral ,FL 33990	
-		
· · · · · · · · · · · · · · · · · · ·		
ARTICLE III PUR The purpose for which the	POSE he corporation is organized is:	e temporary staffing in the construction,
	, manufacturing and hospit	
ARTICLE IV SHA The number of shares of  ARTICLE V INIT	RES stock is: 100	S
		Name and Title:
Address	909 SE 24th St.	Address:
Address	Cape Coral, FL 33990	Audiess.
Name and Title:		Name and Title:
Address		Address:
Name and Title:		Name and Title:
Address		Address:

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and F	REGISTERED AGENT  orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Barbara A Horner		
Address:	909 SE 24th St.	_	
	Cape Coral, FL 33990	_	
ARTICLE VII	INCORPORATOR		
The name and a	ddress of the Incorporator is:		
Name:	Barbara A Horner	<u> </u>	
Address:	909 SE 24th St.		
	Cape Coral, FL 33990	_	
	ned as registered agent to accept service of proce am familiar with and accept the appointment as r		
Barba	ia a Horner		9/4/13
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein ar Department of State constitutes a third degree felo		
Barba	a a. Horner		9/4/13
	Required Signature/Incorporator		Date

13 SEP 30 PM 2: 38