TRANSMITTAL LETTER

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

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SUBJECT: Professional Employers Group Four, Inc.

(Proposed corporate name - must include suffix)

s lampro na a bocc	and one(1) copy of the artic	les of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate		☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		

FROM:		•	-		
	Name (Printed or typed)		-	* 2 2	.
	339 6th Avenue West Address	elle s	- * ;	98 JAN 12	SECRETARY SECRETARY
	Bradenton, Florida 34205 City, State & Zip		- -	M 8:	VOF SIA
	(941) 745-1836 Daytime Telephone number	ż	. • 1	30	

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Professional Employers Group Four, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

339 6th Avenue West

Bradenton, Florida 34205

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Virginia A. Dorris 339 6th Avenue West

Bradenton, Florida 34205

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Virginia A. Dorris 339 6th Avenue west Bradenton, Florida 34205

Ouginia O. Donis
Signature/Incorporator

1/6/98

Date

(An additional article must be added if an effective date is requested.)

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 I am familiar with and accept the obligations of my position as registered agent

Viginia a. Domo Signature/Registered Age 1/6/88

Date