

Department of Division of Cor P.O. Box 6327	State porations			SEC SEC
Tallahassee, FL	32314			盛馬
SUBJECT:	Harvest Staffin	ng, Inc.		多量 5万
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	Harvest Staffing	, Inc.		99 AUG-5 PM 7: 07 SECRETARY OF STORE TALLLAMASSEE FILORIT
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with the filing da	original and one copy and a check for \$70.00. tte. Pusits ERTUKN TH	of the Articles of I. Please return one CORTIFIED COPY 18.75	ncorporation, a design copy of the Articles s BACK TO MG. IL	ation of tamped HAVE INCLUSED
FROM:			70000295	5 1 3374 01051023
Robe	erts A. Nones III	_		01051025 75 *****78.75
Name (pri	int or type)			
6015	S NU OCAL D			
Address	NW 96th Drive			
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ARTICLES OF INCORPORATION OF

Harvest Staffing, Inc.

(Name of Corporation)

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation. ARTICLE 1: NAME The name of the corporation shall be:___ Harvest Staffing, Inc. ARTICLE 2: PRINCIPAL PLACE OF BUSINESS The principal place of business of this corporation shall be (give street address and zip code): ____4723 Edison Avenue, Jacksonville, FL 32254 ARTICLE 3: SHARES All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE The name of the initial registered agent is_ whose registered office is located at the place of business stated in Article 2 above. ARTICLE 5: INCORPORATORS The names and street addresses of the incorporators to these Articles of Incorporation Roberts A. Nones III, 6015 NW 96th Drive, Parkland, FL 33076 Wendy L. Nones, 6015 NW 96th Drive, Parkland, FL 33076 The undersigned incorporators have executed these Articles of Incorporation this Signature Signature Articles of Incorporation

Filing Fee — \$35.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to of Florida s agent, in th	Florida law, the undersigned Corporation ubmits the following statement in desigrestate of Florida.	n organized under the laws of the State ating the registered office/registered
1. The nam	e of the corporation/professional association Harvest Staffing, Inc.	tion is:
2. The name	e and address of the registered agent and	office is:
	Roberts A. Nones III	AUG F
Full name		
	4723 Edison Avenue	SEE
Address (P.C	D. Box not acceptable)	To d
	Jacksonville, FL 32254	9
City, State, a		्रे क

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.

SIGNATURE OF REGISTERED AGENT

DATE

Designation of Registered Agent Filing Fee — \$35.00