PAUL CHISOI 1575-P SPRING HARBOR DR. DELRAY BEACH, FL. 33445 Cit

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	
(Corporation Name)	(Document #) 500043396758 -06/04/0101068020
(Corporation Name)	(Document #) ****160.00 ****160.00
3(Corporation Name)	(Document #)
4(Corporation Name) Walk in Pick up time _	(Document #) Certified Copy
Mail out Will wait	Photocopy
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:	_		
JOB SERVICE INTERHATIONAL LT	δ . c	0.	
ARTICLE II - Address:			
The mailing address and street address of the principal office of the Limited Liability Co 1575-P SPRING HARBOR DRIVE	mpany	is:	
DELRAY BEACH, FL. 33445			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu	re:		
The name and the Florida street address of the registered agent are:			
PAUL GHISOI 1575-P SPRING HARBOR DRIVE			
1575-P SPRING HARBOR DRIVE			
Florida street address (P.O. Box NOT acceptable)			
DELIZAY BEACH, FL 33445 City, State, and Zip			
Having been named as registered agent and to accept service of process for the above staliability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provistatutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 608, Registered Agent's Signature	ent as visions (with an	of all	
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managed therefore, a manager - managed company.	ers and	is,	
		<u> </u>	
(An additional article must be added if an effective date is requested)		€ <u>;</u> =	-17
Signature of a member or an authorized representative of a member.		1	<u></u>
(In accordance with section 608.408(3), Florida Statutes, the execution		= 7	
of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	,	လု	
PAUL GHISOI	*	C:	
Typed or printed name of signee			

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)