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M. THOWAS

MAY - 7 2009

EXAMMER

# **COVER LETTER**

то:	Registration Division of C	Section Corporations				
SUBJE	CCT:	Kin	g Sta	ffing Agency		
	<u> </u>	Name of Limi	ted Liab	ility Company		· <del></del>
The end	closed Articles	of Organization and fee(s) are	submit	ted for filing.		
Please	return all corre	spondence concerning this ma	tter to th	e following:		
				tina King		
			Name (	of Person		
			Firm/C	Company		
				3OX 448		2009 <b>HATT</b>
				dress		
DANIA FL 33004					HANNE PH	
				and Zip Code	COM	で記載している。
-		E-mail address: (to be used	for futur	ENCY@YAHOO. e annual report notification	on)	<u> </u>
For furt	ther informatio	n concerning this matter, pleas	e call:			
		NTINA KING	at (	954 Area Code & Daytime	696-4278	
	Nam	e of Person		Area Code & Daytime	: Telephone Numbe	er
Enclos	ed is a check	for the following amount:				
<b>]</b> \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce	55.00 Filing Fee & certified Copy Editional copy is enclosed	Certificat  (d) Certified	Filing Fee, e of Status & Copy copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee FL 32314		Street/Courier Add Registration Section Division of Corpora Clifton Building	itions	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
KING STAFFING A	GENCY, LLC ity Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2787 EAST OAKLAND PARK BLVD	P.O. BOX 448
SUITE 205	DANIA FL 33004
OAKLAND PARK FL 33306	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registabusiness entity with an active Florida registration.)  The name and the Florida street address of the registration of the	egistered agent are:  Street Apt 2:37  Box NOT acceptable)  FL 33004  and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as it I further agree to comply with the provisions of all afformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

### Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
* NGR	Princeton Smith. 1150 NW 1st Street Apt 2 Danie F1 33004
MC7RM	Cleo Patra ButterField. 200 E Het APT 3 Hollywood Fl. 33020
MGRM	Orystal King 1255 Sw 101 terr. Apt 112. Pemproke piece 33025
<del></del>	
(Use attachment if necessary)	
ICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.)  REQUIRED SIGNATURE:	e date of filing:
Q£	
Signature of a memb	er or an authorized representative of a member.
of this document cons that the facts stated he	yped or printed name of signee
Filing Fees:	6 <del>-</del> 6 <del>-</del> -
\$125.00 Filing Fee for Articles of Orga	