N 1200000 11159

•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only

U RU - 2895. WI ROCC 33077



700236591577

06/20/12--01012--015 **78.75

12 JUL -6 PH 1: 03

9/19/12

COVER LETTER

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

SUBJECT: BEST CHANCES FULL EMPLOYMENT SERVICES, INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original	and one (1) copy of the A	ticles of Incorporation and	d a check for:	
Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate OPY REQUIRED	
FROM	Name (I	Printed or typed)	<u></u> ; .	
		LDA ISLAND RI	<u>)</u>	<u>ب</u> يد.
		Address		VISE THE
	LEESBURG, FL	_ 34788		FIR
	City	, State & Zip	_	6
	352-636-5073			E STORY
	40438 ENDRADO	Sephen Roumber	-	: 055 655 818
			.•	03 03
		· ·		

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

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



MECEIVED 12 JUL -6 PM 3:08

PACAPOSAL OF STATE

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 21, 2012

VIRGINIA LONG 40438 EMERALDA ISLAND ROAD LEESBURG, FL 34788

SUBJECT: BEST CHANCES FULL EMPLOYMENT SERVICES, INC.

Ref. Number: W12000033677

We have received your document for BEST CHANCES FULL EMPLOYMENT SERVICES, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement. that the method of election of directors is as stated in the bylaws.

Section 617.0803, Florida Statutes, requires that the board of directors never have fewer than three directors.

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: 112A00017224

www.sunbiz.org

Affidavit to Release Corporation name for New Articles of Incorporation

STATE OF FLORIDA

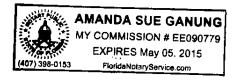
COUNTY OF LAKE

- 1. Introduction. Virginia Long, being duly sworn, deposes and says:
- 2. Description of Deponent. I am the President/Director/Incorporator of Best Chances Full Employment Services, Inc., a corporation organized and existing under the laws of Florida and qualified to do business under the laws of Florida, with its principal offices at: 40438 Emeralda Island Rd Leesburg, FL 34788. I make this affidavit solely as an agent of the above referenced corporation and in no other capacity.
- 3. Revoking Privilege and Release of Name. I do now hereby revoke any former use of corporate name and do now transfer the corporate name: Best Chances Full Employment Services, Inc. to be filed and used with the new articles of incorporation now dated June 15, 2012 having full right, power, and authority to transfer such name.
- 4. Inducement. This affidavit is made for the specific purpose of transferring the corporate name as stated from any/all previous articles of incorporation dated prior to the new articles now dated June 15, 2012.

Signature – Virginia Long

Be it known that on the 15th day of June, 2012 before me appeared Virginia Long who is personally known to me.

Notary - State of Florida



12 JUL -6 PH 1:03

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

RTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing	address, if different is:
	40438 EMERALDA ISLAND RD	40438 EMERAL	DA ISLAND RD
	LEESBURG, FL 34788	LEESBURG, FL 3	34788
RTICLE III	PURPOSE		
	which the corporation is organized is:		
	HE DISABLED IN OBTAINING BETTER	R EMPLOYMENT OPPOR	TUNITIES.
ARTICLE IV	MANNER OF ELECTION The manner in v	which the directors are elected and a	prointed:
THE MANNER IN	WHICH THE DIRECTORS ARE ELECTED OR APPOINTED	SHALL BE SET FORTH IN THE CORP	ORATION BYLAWS, BUT SHALL
	CLUDED BUT NOT BE LIMITED TO, A PRESIDENT, VICE-F INITIAL OFFICERS AND/OR DIRECTOR		ASURER.
	Title: JODI SULLIVAN	Name and Title:	
Address:	PRESIDENT/DIRECTOR	A 11	
	40438 EMERALDA ISLAND RD LEESBURG, FL 34788		
		Name and Title:	
Address:	VICE PRESIDENT/ DIRECTOR 40438 EMERALDA ISLAND RD	•	
	LEESBURG, FL 34788		
NT 11			
Name and Address:	Title: RANDALL MIKELL DIRECTOR/OFFICER	Name and Title:	
Addiess.	40438 EMERALDA ISLAND RD		
	LEESBURG, FL 34788		.,
RTICLE VI	REGISTERED AGENT		73
	lorida street address (P.O. Box NOT acceptable) of	the registered agent is:	<u> </u>
Name:	VIRGINIA LONG		Professor.
Address:	40438 EMERALDA ISLAND RD		d 75.55
	LEESBURG, FL 34788		<u> </u>
RTICLE VII	INCORPORATOR		
he <u>name and ac</u> Name:	Idress of the Incorporator is: VIRGINIA LONG		9 33
Address:	40438 EMERALDA ISLAND RD		3 <u>D</u> M
1	LEESBURG, FL 34788		ठ
;			
laving been na	med as registered agent to accept service of proces	s for the above stated corporation	at the place designated in t
	amiliar with and accept the appointment as registere		
1/		-	7/2/2
Magne	Long		7/3/12
	Required Signature of Registered Agent		Date
submit this doc	ument and affirm that the facts stated herein are tru	e. I am aware that any false infort	mation submitted in a docum
the Departmen	t of State constitutes a third degree felony as provide	d for in s.817.155, F.S.	
The same	1		7/2/17
	Required Signature of Incorporator		11 1117