

TRANSMITTAL LETTER

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

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-03/17/00--01067--001
*****87.50 *****87.50

SUBJECT:

Pro Staff International, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Lorelei T. Pepito

Name (Printed or typed)

2830 SE Tate Ave.

Address

Port St. Lucie FL 34984

City, State & Zip

(561) 343-8146

Daytime Telephone number

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

FILED
00 MAR 17 PM 2:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

3/23

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Pro Staff International, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 2830 SE Tate Ave.
Port St. Lucie
Fl. 34984

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any activity of business permitted by laws
of the U.S. and of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: Five thousand share (5,000) of ten
cents (.10) par value common stock

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es): Lorelei T. Pepito
2830 SE Tate Ave
Port St. Lucie Fl. 34984
Carole Ljung
2830 SE Tate Ave
Port St. Lucie
Fl. 34984

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:
Lorelei Pepito
2830 SE Tate Ave
Port St. Lucie
Fl. 34984

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:
Lorelei T. Pepito and Carole Ljung
2830 SE Tate Ave, Port St. Lucie Fl. 34984

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.

Lorelei T. Pepito
Signature/Registered Agent

March 13, 2000
Date

Carole Ljung
Signature/Incorporator

3-13-2000
Date

FILED
00 MAR 17 PM 2:56
SECRETARY OF STATE
TALLAHASSEE FLORIDA