

P00000080259

TRANSMITTAL LETTER

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

500003353685--00
-08/11/00--01062--001
*****78.75 *****78.75

SUBJECT: Absolute Nursing Solutions, 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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Please return the photocopy to me with the filing date stamped on it.

FROM:

Cheryl Smith
Name (printed or typed)

P.O. Box 451749
Address

Kissimmee, FL 34745
City, State & Zip

407-344-3055
Daytime Telephone Number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 AUG 24 PM 2:46

524
W000-20295

cf 8/24/00
79



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 AUG 24 PM 2:46

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 17, 2000

CHERYL SMITH
POST OFFICE BOX 451749
KISSIMMEE, FL 34745

SUBJECT: ABSOLUTE NURSING SOLUTIONS, INC
Ref. Number: W00000020295

We have received your document for ABSOLUTE NURSING SOLUTIONS, INC.
However, the document has not been filed and is being returned for the following:

YOU MAY FILE WITH ONLY ONE (1) REGISTERED AGENT AND ONLY ONE
(1) HAS TO SIGN.

Please return the 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) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 900A00044324

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 AUG 24 PM 2: 46

1. The name of the corporation shall be Absolute Nursing Solutions, Inc.
2. The principal place of business and mailing address of the corporation is : 315 Eagle Ave., Sebring, FL 33872
3. The corporation shall have the authority to issue 100 shares of stock
4. The registered agent of the corporation is Cheryl Daniel Smith, and the registered street address is 315 Eagle Ave., Sebring, Florida 33872
5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows: Gayle Ann Bartoe: 315 Eagle Ave., Sebring, FL 33872, Cheryl Daniel Smith: P.O. Box 451749, Kissimmee, FL 34745.

The number of directors may be raised or lowered by amendment of the by laws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Cheryl Daniel Smith whose street address is P.O. Box 451749, Kissimmee, Florida 34745

Dated: 8/22/00


Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated: 8/22/00


Registered Agent