

TRANSMITTAL LETTER
P00000102099

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

SUBJECT: MEDICAL STAFFING WORLDWIDE, INC.
(Proposed corporate name - must include suffix)

300003445003--8
-10/30/00--01144--007
*****78.75 *****78.75

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: MICHAEL E. Steuer, CPA
Name (Printed or typed)

2613 Bellhurst Dr.
Address

Dunedin, FL 34698
City, State & Zip

727-733-7638
Daytime Telephone number

FILED
00 OCT 30 PM 12:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

† BROWN OCT 31 2000

ARTICLES OF INCORPORATION

OF

MEDICAL STAFFING WORLDWIDE, INC.

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TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: MEDICAL STAFFING
WORLDWIDE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this
corporation shall be:

1727 THAMES ST.

CLEARWATER, FL 33755

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is
authorized to have outstanding at any one time is: 5,000 (FIVE
THOUSAND).

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

MICHAEL S. WOLFF

1727 THAMES ST.

CLEARWATER, FL 33755

ARTICLE V INCORPORATOR


The name and street address of the incorporator to these Articles of Incorporation is:

MICHAEL S. WOLFF

1727 THAMES ST.

CLEARWATER, FL 33755


The undersigned has executed these Articles of Incorporation this Sixteenth day of October 2000.



Michael S. Wolff, Incorporator

Statement by Registered Agent:

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.



Michael S. Wolff

10-16-00

Date

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TALLAHASSEE FLORIDA