

P01000012252

TRANSMITTAL LETTER

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

FILED

01 JAN 31 AM 8:34

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

400003617574-9  
-01/31/01--01042--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: A Plus Employee Staffing 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: KAREN C. GRIFFIN  
Name (Printed or typed)

P.O. Box 2339  
Address

LAKE WALES, FL 33859  
City, State & Zip

863-678-9535  
Daytime Telephone number

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

D. BROWN FEB - 2 2001

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

A PLUS Employee Staffing, INC.

### ARTICLE II PRINCIPAL OFFICE

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

3830 State Road 17 South  
P.O. Box 2339  
LAKE WALES, FL. 33859

33859

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

Sub-Chapter S Corp.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Tommy Griffin

3830 State Road 17 South  
LAKE WALES, FL. 33859

### ARTICLE V INCORPORATOR

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

KAREN C. And Angela Griffin

3830 St. Rd. 17 South P.O. Box 2339 LAKE WALES, FL. 33859

Karen C. Griffin  
Signature/Incorporator  
Angela N. Griffin

1-29-2001

Date

1-29-2001

(An additional article must be added if an effective date is requested.)

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.

Tommy Griffin  
Signature/Registered Agent

1-29-2001

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA