FILED May 02, 2003 8:00 am Secretary of State 05-02-2003 90742 014 ***150.00

DOCUMENT # P01000015096 1. Entity Name TRUE BLUE SOLUTIONS, INC.					90123136				
	ce of Business	Mailing Address		,	1				
1.0. BOX 44 ACKSONVILL	1723 E, FL 32222	P.O. BOX 441723 JACKSONVILLE, FL 32	222						
2. Principal Place of Business		3. Mailing Address	. .—.						
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FEI Number 59-3698062			Applied For Not Applicate	
Žip	Country	Zip	Countr	ту	\$. Certificate of S	tatus Desired		\$8.75 A	dditional
	6. Name and Address of Curre	ent Registered Agent			7. Name and Ado	resa of New Re			
HEAD, KOKO 9309 OLD KINGS ROAD SOUTH SUITE 4 JACKSONVILLE, FL 32257				Name Street Address ((P.O. Box Number is Not Acceptable)				
A01100111				City			<u> </u>	Zip Co	ode
The Charles				d office or register	en agent or both in	the State of Flor	ida Lamifa	amiliar wit	h and accept
the obligat	named entity submits this statementions of registered agent. Signature, hypother princed name of registered agent.			Agent kignaturé required	J when shinstaying)		CATE		
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