

TRANSMITTAL LETTER

P01000033020

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

800003923898--7  
-03/28/01--01058--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Superior Temporary Assignment Travel Nursing, 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: Daniel M. Seeley, RN  
Name (Printed or typed)

10409 Jean LaFite Ave.  
Address

Thonotosassa, FL 33592  
City, State & Zip

(813) 503-8975  
Daytime Telephone number

01 MAR 28 AM 11:38  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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# 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:

Superior Temporary Assignment Travel Nursing, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10409 Jean Laffite Ave.  
Thonotosassa, FL 33592

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## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is to make available to licensed nursing professionals who enjoy traveling, temporary job assignments in geographical areas of their choosing. It is also this corporations purpose to make available skilled and licensed nursing staff on a temporary basis to health providing organizations in need of such staff.

## ARTICLE IV SHARES

The number of shares of stock is:

1000 shares of stock

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Daniel M. Seeley, RN/CEO  
10409 Jean Laffite Ave.  
Thonotosassa, FL 33592

Yabnia N. Feleipe-Seeley, RN/Director  
PO Box 1202  
Derry, NH 03038

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Daniel M. Seeley  
10409 Jean Laffite Ave.  
Thonotosassa, FL 33592

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Daniel M. Seeley  
10409 Jean Laffite Ave.  
Thonotosassa, FL 33592

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Daniel M. Seeley, RN/CEO  
Signature/Registered Agent

3/26/01  
Date

Daniel M. Seeley, RN/CEO  
Signature/Incorporator

3/26/01  
Date