

TRANSMITTAL LETTER

P01000045472

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAY - 7 PM 1:01

APPROVED  
AND  
FILED

SUBJECT: HIRENROLLMENT INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

000004139380--2  
-05/07/01--01090--004  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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: ROBERT STONER  
Name (Printed or typed)

2965 ST STEVENS DR  
Address

TALLAHASSEE FL 32312  
City, State & Zip

(850) 980-0925  
Daytime Telephone number

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

05/17/01

# 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: HRENROLLMENT INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: PO BOX 13267  
TALLAHASSEE FL 32317-3267

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: OUTSOURCING HUMAN RESOURCE FUNCTIONS

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): ROBERT STONEZ  
2965 ST. STEVENS DR.  
TALLAHASSEE FL 32312  
(PRESIDENT)

## ARTICLE VI REGISTERED AGENT

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

ROBERT F. STONEZ  
2965 ST. STEVENS DR.  
TALLAHASSEE FL 32312

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT F. STONEZ  
2965 ST STEVENS DR. TALLAHASSEE FL 32312

\*\*\*\*\*  
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

Signature/Registered Agent

5-7-01  
Date

Signature/Incorporator

5-7-01  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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