TRANSMITTAL LETTER								
P. Box 6527 Tallahassee, FL 3231	4 000000)45	5000		33	865 0911	<u>-</u>	∃ = ĭ
		:		***87.		****		.*
SUBJECT: Harvest Time Services, Inc.								
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)								
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :								
-					٦			
G \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	& Certified Copy Cert & C		77.50 Ig Fee, ified Copy ertificate of				
	Status ADDITIONAL COPY REQUI							
FROM:		elson inted or typed)					-	·· .
	16001 SW 9	5 Avenue						
	Mami FL City,	33157 State & Zip		SECRET	01 MAY -3 ANTI: 31	-11		
(305) 742 - 3739				AHASSEE	- -	FILED		
Daytime Telephone number			I LORIDA		Ū		· · ·	
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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)

<u>AR TICLE I NAME</u>

The name of the corporation shall be: Harvest Time Services, Inc.

AR TICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

16001 S.W. 95 Avenue Miami, Florida 33157

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To do any and all business as permitted by the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

one (1)

ARTICLE V INITIAL OFFICERS /DIRECTORS (optional)

The name(s) and address(es):

Barbara Nelson 16111 S.W. 95 Avenue Miami, Florida 33157

Althea Bowe 14534 S.W. 142 Ct. Circle Miami, FLorida 33186

ARTICLE VI REGISTERED AGENT

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

Rupert Nelson 16111 S.W. 109 Avenue Miami, Florida 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara Nelson 16111 S.W. 109 Avenue Miami, Florida 33157

Signature/Registered Agent

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Signature/Incorporator

Date