

Division of Corporations

Page 1 of 2

PO1000087756

Florida Department of State  
Division of Corporations  
Public Access System  
Katherine Harris, Secretary of State

## Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H01000096359 4)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

## To:

Division of Corporations  
Fax Number : (850) 205-0381

## From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.  
Account Number : 104512000707  
Phone : (305) 266-4080  
Fax Number : (305) 264-0232

## FLORIDA PROFIT CORPORATION OR P.A.

## FLORIDA WORKFORCE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 SEP -6 PM 1:43

FILED

B. McKinnis SEP - 6 2001

H01000096359

**ARTICLES OF INCORPORATION**

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.*

**ARTICLE I****NAME**

The name of the corporation shall be FLORIDA WORKFORCE, INC.

**ARTICLE II****PRINCIPAL OFFICE**

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

4211 US-1 SOUTH SUITE 55  
SAN AGUSTIN, FL. 32086

**ARTICLE III****SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated ~~COMMON SHARES.~~

**ARTICLE IV****INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

RUBEN FORM  
4211 US-1 SOUTH SUITE 55  
SAN AGUSTIN, FL. 32086

Prepared by: RUBEN FORM  
4211 US-1 SOUTH SUITE 55  
SAN AGUSTIN, FL. 32086  
(904) 797-5517

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 SEP -6 PM 1:43

FILED

H01000096359

H010000 96359

**ARTICLE V  
INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

RUBEN FORM  
4211 US-1 SOUTH SUITE 55  
SAN AGUSTIN, FL. 32086

DIRECTOR & PRESIDENT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

4 day of September 2001.

  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

H010000 96359

H01000096359

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FLORIDA WORKFORCE, INC.

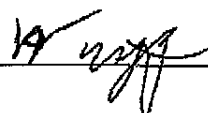
2. The name and address of the registered agent and office is:

RUBEN FORM  
4211 US-1 SOUTH SUITE 55  
SAN AGUSTIN, FL. 32086

FILED  
01 SEP -6 PM 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

  
(SIGNATURE)

9/4/01  
(DATE)

H01000096359