

PO100009/459

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

SUBJECT:

@JOB CIRCUIT, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

(Please note: @JOB is one word)

700004588637-4

-09/14/01--01053--010

*****78.75 *****78.75

Enclosed are 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 Tannacore

Name (Printed or typed)

6441 NW 171 St Street

Address

Miami, FL 33015

City, State & Zip

(305) 819-2334

Daytime Telephone number

Robert Tannacore

AUTHORIZATION BY PHONE TO

add shares

DATE

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

DOC. #

9/18/07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 SEP 14 PM 3:13

FILED

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:

@JOB CIRCUIT, Inc.

(Please note:
@job is one word)

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6441 NW. 171st Street
Miami, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical Staffing

ARTICLE IV SHARES

The number of shares of stock is:

1 SHARE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Robert Iannacone
President
6441 NW 171st Street
Miami, FL 33015

ARTICLE VI REGISTERED AGENT

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

Robert Iannacone
6441 NW 171st Street
Miami, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert Iannacone
6441 NW 171st Street
Miami, FL 33015

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

9/10/01

Date



Signature/Incorporator

9/10/01

Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA