

TRANSMITTAL LETTER

P01000112767

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

SUBJECT: ALARE'S NURSES REGISTRY, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300004693493--8
-11/26/01--01067--020
*****87.50 *****87.50

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: TAJUDEEN AJAO
Name (Printed or typed)

1175 NW 113 TERRACE
Address

MIAMI, FLORIDA 33168
City, State & Zip

305-754-5423
Daytime Telephone number

01 NOV 26 PM 1:14
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Ps 11/28/01

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

ALARE'S NURSES REGISTRY, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1175 NW 113 TERRACE
MIAMI, FLORIDA 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide temporary nursing staff, HHA, CNA, Live-in Companion,
Recruitment (Domestic & Foreign) of RNS for Hospitals.
Home Health visits, Staffing & Schools nursing units.

ARTICLE IV SHARES

The number of shares of stock is:

50,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

TAJUDEEN AJAO CEO
ESTHER N. FAYSON
SHERIFAT B. AJAO

ARTICLE VI REGISTERED AGENT

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

TAJUDEEN LAYI AJAO
1173 NW 113 TERR.
MIAMI, FLORIDA 33168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ESTHER N. FAYSON
1173 NW 113 TERR.
MIAMI, FLORIDA 33168

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

Date

Signature/Incorporator

Date