PO/OOO/18837

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

SUBJECT: Angel Nurses Staffing Seivices Incorporated (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 ADDITIONAL CO	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	2115 Washing	Printed or typed) TON AVE. # 3	Tr. Page Floring S2
	305 \$38	3-9817 Telephone number	139 3000047211366 -12/12/0101076002 *****70.00 *****70.00 5000047211366 -12/12/0101076003 ******8.50 ******8.50
			6000 <u>04721136</u> -6

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

8/12/18

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