

FROM : AFFORDABLE PARALEGAL

FAX NO. : 954-565-1347

Jan. 15 2002 11:56AM P1

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : AFFORDABLE PARALEGAL, FT. LAUDERDALE
Account Number : I20000000264
Phone : (954)565-9929
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA PROFIT CORPORATION OR P.A.

AgencyNursesOnline, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the Corporation shall be:
AgencyNursesOnline, Inc.

ARTICLE II PRINCIPAL OFFICE

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

principal place of business:

3242 NE 6th Street

Pompano Beach, FL 33062

mailing address:

6278 North Federal Highway, P.M.B. # 294

Fort Lauderdale, FL 33308

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is :
100 shares

ARTICLE IV DIRECTORS

The number of directors constituting the initial board of directors is two (2), and the name and address of the person or persons who are to serve as directors until the first annual meeting of the shareholders or until their successors are elected and qualified are:

Allan Todd Hawkins

3242 NE 6th Street

Pompano Beach, FL 33062

Daniel Malcolm Williams

1919 NE 18th Street

Fort Lauderdale, FL 33305

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Allan Todd Hawkins

3242 NE 6th Street

Pompano Beach, FL 33062

ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

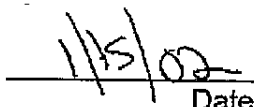
Daniel Malcolm Williams

1919 NE 18th Street

Fort Lauderdale, FL 33305



Signature/Incorporator



Date

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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/Registered Agent



Date

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