

P02000014533

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

FILED  
02 FEB -4 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: AMERICAN STAFFING, INC. FL 01  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: AUGUSTINE K. SAMUKA  
Name (Printed or typed)

2702 CARLSON CIRCLE SUITE #201  
Address

MELBOURNE, FLORIDA 32901  
City, State & Zip

321) 728-8298  
Daytime Telephone number

700004864187--5  
-02/04/02--01058--008  
\*\*\*\*\*87.75 \*\*\*\*\*87.75

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

J. BRYAN FEB 8 2002

# 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:

American Staffing Inc. - FL.01

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2702 Carlson Circle Suite #201  
Melbourne, FL 32901

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide staffing needs of Health Care Facilities  
and Medicaid waiver clients in Brevard County

## ARTICLE IV SHARES

The number of shares of stock is: 10

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Mr. Augustine K. Samuka  
2702 Carlson Circle Suite #201  
Melbourne, FL 32901

## ARTICLE VI REGISTERED AGENT

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

Mr. Augustine K. Samuka  
2702 Carlson Circle Suite #201  
Melbourne, FL 32901

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mr. Augustine K. Samuka  
2702 Carlson Circle Suite #201  
Melbourne, FL 32901

\*\*\*\*\*  
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

AK Samuka  
Signature/Registered Agent

01/23/02  
Date

AK Samuka  
Signature/Incorporator

01/23/02  
Date

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