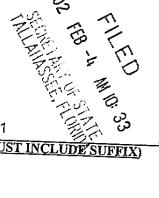
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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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SUBJECT: AMERICAN STAFFING, INC. FL 01

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origin	al and one(1) copy of the articl	es of incorporation and a	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
FROM:	AUGUSTINE K. SAMUKA		
	Name (Pri	nted or typed)	
	2702 CARLSON CIRC	LE SUITE #201 dress	
•	MELBOURNE, FLORIDA 32901		
	City, St	ate & Zip	
-	321) 728-82 Daytime Tele	298 phone number	

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

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

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

Signature/Registered Agent	 01/23/02 Date
Signature/Incorporator	01/23/02 Date