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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
ertified Copies	(Document Number) Certificates of Status
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TRANSMITTAL LETTER

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

\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
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ADDITIONAL CO	Status PPY REQUIRED
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1	loyd rinted or typed) Ksburg Avenu Address FL 3220 State & Zip

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)

FILED 03 JAN 23 AM 9: 02

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME
PINNACLE STAFFING GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

1201 West Beaver Street
JACKSONVILLE, FLORIDA 32202
DUVAL COUNTY

ARTICLE III PURPOSE

The purpose of this business is to provide companies with temporary and permanent employees. It is also designed to outsource human resources functions.

ARTICLE IV SHARES

Pinnacle Staffing Group Inc., shall issue 1 common stock at no par value

ARTICLE V INITIAL OFFICERS/DIRECTORS

Bobbi R. Floyd CEO

ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent shall be: Bobbi R. Floyd 4906 Fredericksburg Avenue Jacksonville, Florida 32208

ARTICLE VII INCORPORATOR

The name and address of the incorporator shall be: Bobbi R. Floyd 4906 Fredericksburg Avenue Jacksonville, Florida 32208

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

Signature/Incorporator

Date

1/13/03

Date