

PO3000051378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

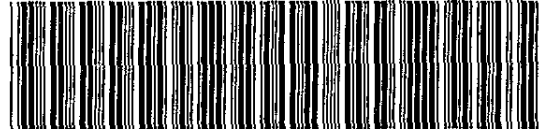
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FALLAUX, JACQUES  
FALLAUX, JACQUES

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## TRANSMITTAL LETTER

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

SUBJECT: Seasonal Staffing, Inc.  
(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

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Dan Collarney  
Name (Printed or typed)

837 Palm Street  
Address

Marco Island FL 34145  
City, State & Zip

239 734 0288  
Daytime Telephone number

**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:

Seasonal Staffing, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

837 Palm Street  
Marco Island FL 34145

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Seasonal employee Staffing Co.

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

/

## ARTICLE VI REGISTERED AGENT

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

Maxine Collardey  
837 Palm Street  
Marco Island FL 34145

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

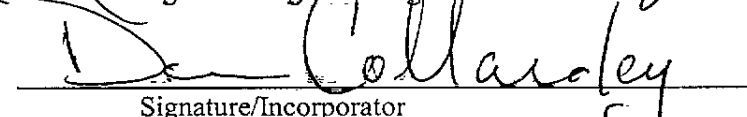
Dan Collardey  
837 Palm Street  
Marco Island FL 34145

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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

5/1/03  
Date

  
Signature/Incorporator

5/1/03  
Date

FILED  
03 MAY -2 AM 9:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA