## P03000101151

(Requestor's Name)				
(Address)				
(Address)				
(1841000)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Octanica copies Octanicates of Status				
Special Instructions to Filing Officer:				

Office Use Only



200022872982

09/16/03--01023--018 \*\*87.50

(8)/10/03--01029--018 \*\*78.75

SECRETARY OF STATE

> 0.2

## TRANSMITTAL LETTER

(PROPOSED CORPORATE NAME - MUST INCLUDE SUITIX)

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

Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM: PHRONIÈ G. WARNER. Name (Printed or typed)				
	1420 NW	56 Ave		
(	Sauderen	State & Zip	ne i Da	
	954. 465. Daytime T	elephone number		

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME  The name of the corporation shall be:	03 SEP 10 AM 9: 58
SEASON'S FINEST INC	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  5546 W. OAK LAND PARK BI	D. Suite 207
Lauderhill, Florish 33313	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  STAFFING SERVICES	
ARTICLE IV SHARES The number of shares of stock is: 100,000 NO PAR VALUE	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
NORMAN LOBBAN SEC. 5546 W. OAKLAND PARK BIVD SUITE 2	07 LAUDERNIN FLA 33213
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:	
PHRONIE G. WARNER	
1420 NW 56 AUE Lauderhild, Florida 33313	
ARTICLE VII INCORPORATOR	
The name and address of the incorporator is:	
PHRONIÈ G. WARNER	
LAUDERHILL FLORIDA 33313	
**************************************	**************************************
certificate, I am familiar with and accept the appointment as registered agent and agre	
The Shapen	9.9.03
Signature/Registered Agent	Date
Lith Italian	a belos
Signature/Incorporator	Date

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)