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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: EMPLOYMENT PARTNERS, INC
(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: BARRY DICKSON CPA
Name (Printed or typed)

121 PALAFOX PLACE STE. C
Address

PENSACOLA FL 32502-5635
City, State & Zip

850-438-2122
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

EMPLOYMENT PARTNERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

500 N. NINTH AVE.
PENSACOLA, FL. 32501

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EMPLOYEE LEASING BROKERAGE

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

HAILEY LOVATO
500 N. NINTH AVE.
PENSACOLA, FL 32501

ARTICLE VI REGISTERED AGENT

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

HAILEY LOVATO
500 N. NINTH AVE.
PENSACOLA, FL 32501

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HAILEY LOVATO
500 N. NINTH AVE.
PENSACOLA, FL 32501

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

2 
Signature/Registered Agent

2/4/04
Date

J 
Signature/Incorporator

2/4/04
Date