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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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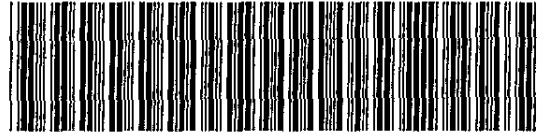
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

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11/7/04
SP



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 17, 2004

JAMES CLAIRSAINT
2550 WEST COLONIAL DRIVE
SUITE 414
ORLANDO, FL 32804

SUBJECT: LIBERTY STAFFING AND JOB TRAINING, INC.
Ref. Number: W04000042098

We have received your document for LIBERTY STAFFING AND JOB TRAINING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

An effective date may be added to the Articles of Incorporation if a 2005 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Document Specialist
New Filings Section

Letter Number: 004A00065369

**ARTICLE OF INCORPORATION
For**

LIBERTY STAFFING and JOB TRAINING, INC.

(A Florida for Profit Corporation)

The Undersigned, acting as incorporator (s) of a corporation pursuant to Chapter 617, Florida Statutes, adopt (s) the following Article of incorporation.

ARTICLE I

The name of the corporation is LIBERTY STAFFING and JOB TRAINING , INC. called, (the "Corporation")

ARTICLE II

The address of the principal office and the mailing address of the Corporation shall be:
2550 West Colonial Drive Suite 414 Orlando, Florida 32804

The mailing address of the Corporation Shall be:

2550 West Colonial Drive Ste. 414 Orlando, FL 32804

ARTICLE III

The Corporation is organized exclusively to provide job training and to individuals in the targeted Greater Orlando areas.

The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows:

<u>Number of Shares Authorized</u>	<u>Par Value Per Share</u>	<u>Class of Stock</u>
100	\$1.00	Common

ARTICLE IV

The Board of Directors of the Corporation shall consist of at least five directors, with the exact number to be fixed from time to time in the manner provided in the Corporation's Bylaws. The number of directors constituting the initial Board of Directors are five, and the name and address of the member of the initial Board of Directors, who will serve as the Corporation's directors until successors are duly elected and qualified are:

ARTICLE V

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The number constituting the initial Board of Directors of the Corporation shall be Five (5). The names and addresses of the persons who shall serve as the initial Board of Directors of the Corporation are as follow:

James Clairsaint
President
2550 W. Colonial Drive Ste. 414
Orlando, Florida 32804
Tel: (321) 299-8554
Email: orlandos108@aol.com

Pierre Juwan Nesly
Executive Director
P.O. BOX 550659
Orlando, Florida 32855
Tel: (407) 325-4604

Ernst Dorilas
Coordinator
P.O BOX 550659
Orlando, Florida 32855
Tel: (321) 438-8475

Mariola Clairsaint
Secretary
1726 Mont View Street
Orlando, Florida 32805
Tel: (407) 420-9144

Synthia Baretto
Treasurer
4748 S. Rio Grande Ave. # 90
Orlando, Florida 32839
Tel: (407) 407-5401664

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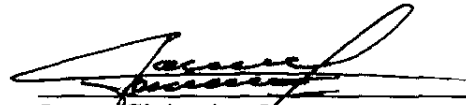
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Tel: (407) 420-9144

Synthia Baretto
Treasurer
4748 S. Rio Grande Ave. # 90
Orlando, Florida 32839
Tel: (407) 407-5401664

ARTICLE VII

The name of the sole incorporator is James Clairsaint, hereinafter called (the "Incorporator")

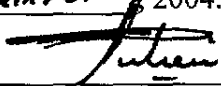
IN WITNESS WHEREOF, the undersigned authority, being the Incorporator for the purpose of forming a Corporation pursuant to the Florida Not for Profit Corporation Act, Chapter 617, Florida Statutes, as amended, has signed these Articles of Incorporation on this 10th day of November, 2004.


James Clairsaint, Incorporator

STATE OF FLORIDA)
)
COUNTY OF ORANGE

BEFORE ME, the undersigned authority, personally appeared James Clairsaint, to me known to be the person described in the executed foregoing Articles of Incorporation, who, after being duly sworn under oath, acknowledged before me that said person executed the same for the purpose therein express. He (is personally known to me) or (has produced a Florida's state Drivers License as identification).

WITNESS my hand and official seal in the State and County aforesaid, this 10th of November, 2004.



Notary Public, State of Florida



Sylvester Harold Julien
My Commission #D152612
Expires September 23, 2006

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of sections 607. 0501 or 617.0501, Florida Statutes, the undersigned Corporation, Organized under the laws of the State of Florida, Submits the following statement in designating the registered office/ registered agent, in the State of Florida.

ARTICLE VI

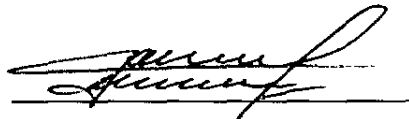
LIBERTY STAFFING and JOB TRAINING, INC.

1. The name and address of the registered agent and office is:

James Clairsaint
2550 W. Colonial Drive Ste. 414
Orlando, Florida 32804
Tel: (321) 299-8554

HAVING BEEN NAMED AS REGISTERED AGENT AND DO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE:



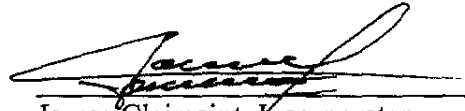
DATE:

11-10-04

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STATE OF FLORIDA)
)
COUNTY OF ORANGE

BEFORE ME, the undersigned authority, personally appeared James Clairsaint, to me known to be the person described in the executed foregoing Articles of Incorporation, who, after being duly sworn under oath, acknowledged before me that said person executed the same for the purpose therein express. He (is personally known to me) or (has produced a Florida's state Drivers License as identification).

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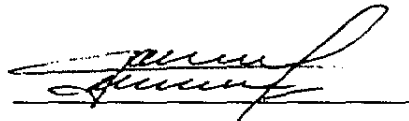
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SIGNATURE:



DATE:

11-10-04