

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 205-0381

From:

: LIEBERMAN & ASSOCIATES, P.A. Account Name

Account Number : 120040000159 Phone : (954)491-0411

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FLORIDA PROFIT CORPORATION OR P.A.

ELITE STAFFING PROVIDERS, INC

Certificate of Status	1
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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE ONE

NAME

The name of the corporation shall be:

ELITE STAFFING PROVIDERS, INC

ARTICLE TWO-

PRINCIPAL OFFICE

The principle place of business and mailing address of this Corporation shall be:

6043 NW 167 STREET, A-27 MIAMI LAKES, FLORIDA 33015

ARTICLE THREE CAPITAL STOCK

The number of shares of stock that this Corporation is authorized to have outstanding at one time is one thousand shares of common stock with a par value of one dollar.

ARTICLE FOUR PURPOSE OF BUSINESS

The nature of this business will be STAFFING PERSONEL

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ARTICLE FIVE INITIAL OFFICERS AND/OR DIRECTORS

LEONEL E MESA JR, PRESIDENT 6043 NW 167 STREET, A-27 MIAMI LAKES, FLORIDA 33015

LEDIA URBANO, VICE PRESIDENT 6043 NW 167 STREET, A-27 MIAMI LAKES, FLORIDA 33015

RAYMOND D MESA, SECRETARY 6043 NW 167 STREET, A-27 MIANI LAKES, FLORIDA 33015

GUILLERMO FERNANDEZ, TREASURER 6043 NW 167 STREET, A-27 MIAMI LAKES, FLORIDA 33015

ARTICLE SIX
INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:
LEONEL E MESA JR
6043 NW 167 STREET, A-27
MIAMI LAKES, FLORIDA 33015

ARTICLE SEVEN INCORPORATOR

The name and address of the Incorporator is:

Kenneth Lieberman

800 E Cypress Creek Rd, Suite 200

Ft. Lauderdale, FL 33334

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The undersigned has executed these Articles of Incorporation. This $\theta^{\rm TE}$ day of JULY.

Signature: ______

CERTIFICATE OF DESIGNATED REGISTERED AGENT

Pursuant to the provisions of section 607.0501 Florida Statutes, the Undersigned Corporation, under the Laws of the State of Florida submits to the following statement designating the registered agent in the State of Florida.

- 1. The name of the corporation is: ELITE STAFFING PROVIDERS, INC.
- 2. The name and address of the registered agent LEONEL E MESA JR

6043 NW 167 STREET, A-27 MIAMI LAKES, MLORIDA 33015

Signature:

Date:

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Having been named as the Registered Agent and to accept service of process for the above stated corporation at the place designated in this Certificate, I accept the appointment as Registered Agent and agree to comply with the provisions of all the 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.

Sicuature

Date:

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