

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112 : (302)575-0875 Phone

Fax Number : (302)575-0925

FLORIDA PROFIT/NON PROFIT CORPORATION

One Source Staffing Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION One Source Staffing Inc.

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

ARTICLE 1 NAME

The name of the corporation shall be: One Source Staffing Inc.

PRINCIPAL OFFICE

MONIE SE ON STATE 20 The principal place of business/mailing address is: 1548 Lake Villa Drive, Tavares, FL 32778.

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporations Act of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock authorized to issue 1,500 shares of no par common voting stock.

ARTICLE V REGISTERED AGENT

The name and Florida street address of the registered agent is Agents and Corporations, Inc., 300 Fifth Avenue South, Suite 101-330, Naples, FL 34102.

INCORPORATOR

The name and address of the Incorporator is: John L. Williams, Esq., 300 Fifth Avenue South, Suite 101-330, Naples, FL 34102.

ARTICLE VII OFFICERS/DIRECTORS

The name and address of the Officer/Director is:

Bret E. Williams - Director/President

Llsa M. Williams - Director/Secretary/Treasurer

1548 Lake Villa Dr., Tavares, FL 32778

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 appointment as registered agent and agree to act in this capacity

Comorations, Inc., Registered Agent

illiams. Vice President

ature/Incorporator, John L. Williams

 $\frac{8/7/\upsilon7}{\text{Date}}$