## P12000018982

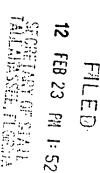
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(bocument Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
<b>3</b>				
4)12-8872				

Office Use Only



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## COVER LETTER

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

SUBJECT: DideSky Employment is	nangament, ii	IC.
(PROPOSEĎ CORPORA)	ΓΕ NAME – <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	les of incorporation an	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
FROM: <b>Jennifer Davis</b> Name	(Printed or typed)	
16350 Bruce B. Downs B	Ivd. #4653	Le
Tampa, FL 33646	State & Zip	
813-476-5037 Daytime Te	lephone number	

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

jennifer@greydogsolutions.com
E-mail address: (to be used for future annual report notification)



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2012

JENNIFER DAVIS 16350 BRUCE B. DOWNS BLVD. #46536 TAMPA, FL 33646

SUBJECT: BLUESKY EMPLOYMENT MANAGEMENT

Ref. Number: W12000008872

We have received your document for BLUESKY EMPLOYMENT MANAGEMENT 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 912A00006888

## ARTICLES OF INCORPORATION

	In compliance with Chapter 607 and	d/or Chapter 621,	FILED-
ARTICLE I The name of the c	NAME BlueSky Employment Morporation shall be:	lanagement	Inc12 FEB 23 PM 1: 52
ARTICLE II	PRINCIPAL OFFICE		
	Principal <u>street</u> address 16350 Bruce B. Downs Blyd ギタレらるし Tampa, FL 33646	.*	Mailing address if different is:
			, 4
This corpora	PURPOSE  which the corporation is organized is: tion is being formed to serve as a recustomer service professionals.	ruiting and m	anagement organization for
45555			•
ARTICLE IV The number of sha	SHARES  ares of stock is: IOO		
The number of size	ares of stock is.		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR		
Name and T	Pitte: Jennifer Davis, President 16350 Bruce B. Downs Blvd, #46536	_ Name and Titl	e: Jeffrey T. Davis, Vice President
Addiess.	Tampa, FL 33646		16350 Bruce B. Downs Blvd. Tampa, FL 33646
		<del></del>	1811pa, 1.L. 350-to
N 1 7	Walter I Committee to the state of the state		
Address:	itle:Karen Harrington, Managing Directo	Address:	e:
Address.		_ Address:	
		<del></del>	
Name and T	241	N. 170'41	
Name and T Address:	itie:	_ Name and Titl Address:	e:
radioss.			
		_	
	REGISTERED AGENT  prida street address (P.O. Box NOT acceptable) of Jeffrey Davis  16350 Bruce B. Downs Blvd. #465  Tampa, Fl. 33646	_	ent is:
ARTICLE VII	INCORPORATOR	٠.	
	dress of the Incorporator is:		
Name:	Jennifer Davis	<del>-</del>	
Address:	16350 Bruce B. Downs Blvd #4653 Tampa, FL 33646	36	
Having been nam this certificate, I a	ed as registered agent to accept service of proces m familiar with and accept the appointment as reg	s for the above si istered agent and	tated corporation at the place designated in agree to act in this capacity
	TO Xambour		mm / /m
	J Chillas		02/11/12
	Required Signature/Registered Agent		Date
I submit this doci document to the D	ument and affirm that the facts stated herein are department of State constitutes a third degree felon	true. I am awar y as provided for	e that the false information submitted in a in s.817.155, F.S.
Lina	La I Variat		17/11/13
- Jerke	Required Signature/Incorporator	***	Date