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(Requ	estor's Name)	
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(City/S	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	

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TALLAHASSEE FLOR

S.

W14-27255

COVER LETTER

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

SUBJECT:	Dynamic HK	. Jointions	, INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	d a check for:	
□ \$70.00	\$78.75	\$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
-	& Certificate of Status	& Certified Copy	Certified Copy	
	•		& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
		<u> </u>		
		. 44 .		
FROM:	JASON	W. CARI	2	
TROM:		` ' '		
	4780 NW 39th Ave., Suite 5			
	Address			
	GAINESY	MIE EL	32000	
GAINESVILLE, FL 32606 City, State & Zip				
352 - 519-5244 Daytime Telephone number				
	Daytime To	elephone number		
	E-mail address: (to be used	erceexpress	BOTOS, COM	
	E-mail address: (to be used	for future annual report	iorification)	

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

COVER LETTER

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

SUBJECT:	Dynamic HR	Solutions	, INC.	
	(PROPOSED CORPORA	ΓΈ NAME – <u>MUST INCL</u>	<u>ude suffix</u>)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
	\$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: JASON W. & CARR Name (Printed or typed)				
4780 NW 39th Ave., Suite 5				
GAINESVILLE, FL 32606 City, State & Zip				
352 - 519 - 5244 Daytime Telephone number				
E-mail address: (to be used for future annual report notification)				

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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 30, 2014

JASON W. CARR **4780 NW 39TH AVE SUITE 5** GAINESVILLE, FL 32606

SUBJECT: DYNAMIC HR SOLUTIONS, INC.

Ref. Number: W14000027255

We have received your document for DYNAMIC HR SOLUTIONS, 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. consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return 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.

Jessica A Fason Regulatory Specialist II

Letter Number: 014A00009232

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

ARTICLE I	NAME	Dynamic	LIR <	alution	e INC	
	corporation shall be:	Dynamic	<u>د ۱۱۱۷ و</u>	MINONY.	3, 1140	<u> </u>
ARTICLE II	PRINCIPAL OFI Principal street			Mailing address,	if different is:	
47801	W 39th Ave			waning address,	ii different is.	
				· <u></u>		
Gaine	sville, FL	32606			<u> </u>	·
ARTICLE III	PURPOSE		1 00	1 (
The purpose for	which the corporation	is organized is:	taffing	Indu	stry,	<u>tem</u>
orary	, and pe	is organized is: 5	ob plac	ement.		
			<u> </u>	<u> </u>		
		-				
7,				 	-	
ARTICLE IV	SHARES ares of stock is:)()()			₩	
The number of sh	nares of stock is:				E T	
ARTICLE V	INITIAL OFFICE	ERS AND/OR DIRECTO	RS		語言	Ū
Name a		ON CARR, CE	_ _	. .	SSS 4	1 1
	1790 N	W39th Ave, Ste			77 7	7 7 7
Address					## N	
	<u>Gaine</u>	esville, FL 320	606		豆品 6	·
					•	
Name an	d Title: Stephe	n CARR, CFO	Name and Title	3:		
Address		139th Ave, Ste				
11441050		sville, FL 3260				
	Claures	111e, 16 0000	66			
			_ _			
Name and	d Title: John (Carr Coo	Name and Title):		
A didunga	4780 h	11.1 39th Aug 5	to5	<u></u>		
Address	2	Carr, COO IW 39th Ave, E sville, FL 320	Address:			
	Gaines	1411K, TL 320	200			

Name and Title:	Name and Title:
Address	Address:
<u></u>	
-	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box	NOT acceptable) of the registered agent is:
Name: STEPHEN	CARR
Address: 8478	0 NW 39th Ave Ste 5
gainesville	0 NW 39th Ave, Ste 5 FL 32606
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: JASON (CARR
Address: 4780 NW 3	9th Ave Ste 5
Gainesvill	9th Ave, Ste 5 e, FL 32606
Having been named as registered agent to acco	ept service of process for the above stated corporation at the place designated
this certificate, I am familiar with and accept the	e appointment as registered agent and agree to act in this capacity
Steph Dan	5/9/14
Required Signature/F	egistered Agent Date
I submit this document and affirm that the ful	ets stated herein are true. I am aware that the false information submitted in s a third degree felony as provided for in s.817.155, F.S.
Required Signature	$\frac{\mathcal{H} \cdot 25 \cdot 14}{\text{Elements}}$ Theorem 2. Date
	SEC 7
V	
	SO TO THE PERSON OF THE PERSON
	FILCON WILL AM 7. HASSEE FLO
	THE COLD AN 7: 26 SECRETARY OF STATE ALLAHASSEE FLORIDA
	> 1.1 €J