## P19000074118

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J. FASON OCT 02 2019

## COVER LETTER

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: □ \$78.75 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee. & Certified Copy Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED FROM:

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

Circle Dansley	will not rei	nstate
Work-force Search (-)		Inc
Document number <u>7180000 746</u>	01	μ.

And will file a new filing with the same name.

SIGN NAME

DATE

## ARTICLES OF INCORPORATION

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

OCLE III PURPOSE ourpose for which the cor	poration is organized is:		
AND ALL LAWFUL BI	poration is organized is:		
AND ALL LAWFUL BI	USINESS		
' AND ALL LAWFUL BI			
	<del></del>		
TCLE V INITIAL OF	FICERS AND/OR DIRECTORS DY WAMSLEY, P/S/T/D	Name and Tid o	
	MORNINGSIDE COURT	Name and Title:Address:	
TAL	LAHASSEE, FL 32301		
<del></del>			
Address			22 23 25 25 25 25 25 25 25 25 25 25 25 25 25
Name and Title:	····	Name and Title:	2 Z
Address		Address:	1

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT		
Name:	Florida street address (P.O. Box NOT acceptable CINDY WAMSLEY	of the registered agent is:	
Address:	1128 MORNINGSIDE COURT		
	TALLAHASSEE, FL 32301	<u> </u>	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The name and a	ddress of the Incorporator is:		
Name:	CINDY WAMSLEY		
Address:	1128 MORNINGSIDE COURT		
	TALLAHASSEE, FL 32301	<u> </u>	
Effective date, if	EFFECTIVE DATE: Tother than the date of filing: date is listed, the date must be specific and ca		r 90 days after the
Note: If the date the document's o	e inserted in this block does not meet the applica effective date on the Department of State's recor	ble statutory filing requirements, this ls.	date will not be listed as
Having been nat this certificate, I	med as registered agent to accept service of pro- am familiar with and accept the appointment as	ess for the above stated corporation registered agent and agree to act in t	at the place designated in his capacity
Lind	y k amoles	10	0/2/19
0	Required Signature/Begistered Agent		Date
I submit this document to the	cument and affirm that the facts stated herein of Department of State constitutes a third degree for	ire true. I am aware that the false in lony as provided for in s.817.155, F.S	formation submitted in a
Cin	ly 4 Jamples		0/2/19
Requ	ured Signature/Incorporator	<del></del>	Date