

P23000002009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

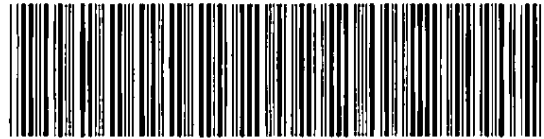
(Document Number)

Amended Copies _____

Certificates of Status _____

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Office Use Only



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S. CHATHAM
JAN 11 2023

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
23 JAN 11 AM 7:06

CHATHAM COUNTY, GEORGIA

23

900400131139
JAN 11 AM 11:41

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: MISTY 1/11

XX CERTIFIED COPY _____

PHOTOCOPY _____

CUS _____

XX FILING

INC _____

1. XTRA-PERSONNEL INC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Xtra-Personnel Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1770 S Ocean Blvd., Ste. 301

Pompano Beach, FL 33062

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Staffing Company

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ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shelby Klepfer - President, Director

Name and Title: Clifton Baker - VP, Director

Address: 1770 S Ocean Blvd., Ste. 301
Pompano Beach, FL 33062

Address: 1770 S Ocean Blvd., Ste. 301
Pompano Beach, FL 33062

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Registered Agents Inc.

Address: 7901 4th St. N, Suite 300

St. Petersburg, FL 33702

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Amanda J. Beren

Address: 31416 Agoura Rd., Suite 118

Westlake Village, CA 91361

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 the appointment as registered agent and agree to act in this capacity

Ber Beren

Required Signature/Registered Agent

01/10/2023

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

AJB

Required Signature/Incorporator

01/10/2023

Date