

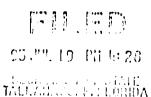
Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: AFFORD-A-STAFF, INC.	
(proposed corporate name)	
Enclosed please find an original and one (1) copy of the above corporation and check in the amount of \$	ne articles of incorporation for the
	500001540995 -07/19/9501022011 ++++122,50 ++++122,50
FROM: OLIVER ACKERLEY	
Name	
1554 S FT HARRISON AVE.	
Address	
CLEARWATER, FL 34616	
City, State, & Zip	
(<u>813</u>) 461 6222 Telephone Number	=1, 13
relephone Nomber	THE STATE OF THE S
	The second second
	6 To 1
,	4
NMV as	Lo Lo

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

<u>QF</u>



AFFORD-A-STAFF, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

AFFORD-A-STAFF, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1554 S. Ft. Harrison Ave. Clearwater, F1 34616

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000 CLASS A COMMON STOCK NO PAR 100,000 CLASS B PREFERRED STOCK NO PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

OLIVER ACKERLEY 1554 S Ft Harrison Ave Clearwater, F1 34616

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

> Oliver Ackerley 1554 S Ft Harrinon Ave Clearwater, Fl 34616

The undersigned has(have) executed these Articles of Incorporation this

12th day of July 19 95

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

	of the corporation is:_			
	and address of the reg	istered agent	and office is:	
	(NAN	ИE)		<u></u>
155	54 S Ft Harrison	Λve		
	(P.O. BOX NC		SLE)	
CLI	EARWATER, FL	34616		
	(CITY/S	STATE/ZIP)		
		SIGNATU	RE <u>fluir flir</u> (corporate office President	the ley
		DATE	7/12/95	
PROCESS FOR THIS CERTIFIC AND AGREE TO PROVISIONS C FORMANCE O	NAMED AS REGIS RTHE ABOVE STATEI CATE, I HEREBY ACC O ACT IN THIS CAPA OF ALL STATUTES RE F MY DUTIES, AND I POSITION AS REGIST	D CORPORAT EPT THE APP CITY. I FURT ELATING TO T AM FAMILIAI FERED AGENT	ION AT THE PLACE OINTMENT AS REC HER AGREE TO CO THE PROPER AND R WITH AND ACCE T.	E DESIGNATED IN SISTERED AGENT OMPLY WITH THE COMPLETE PER- EPT THE OBLIGA-
		SIGNATUI	RE / Slive la	Melwy

REGISTERED AGENT FILING FEE: \$35.00