

1201 HAYS STREET

TAMPA, FL 33601

704 221-1111

904 221-1111 FAX

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networks

PRESTIGE HALL
LEGAL & FINANCIAL SERVICES

ACCOUNT NO. : 07210000003

REFERENCE : 654706 118517A

AUTHORIZATION :

Patricia Poynt

COST LIMIT : 9 70.00

ORDER DATE : August 7, 1995

ORDER TIME : 9:19 AM

400001553904

ORDER NO. : 654706

CUSTOMER NO: 118517A

CUSTOMER: Jeffrey M. Fuller, Esq
FULLER SWINDLE &
HOLSONBACK, P.A.
Suite 2650
100 N. Tampa Street
Tampa, FL 33602

DOMESTIC FILING

NAME: PROFESSIONAL STAFFING, INC.

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lori R. Dunlap

EXAMINER'S INITIALS:

T. BROWN

AUG - 7 1995

FILED
95 AUG - 7 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
PROFESSIONAL STAFFING, INC.

FILED
95 AUG -7 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as the incorporator of Professional Staffing, Inc. under the Florida Business Corporation Act, adopts the following Articles of Incorporation.

ARTICLE I. NAME

The name of the corporation is:

Professional Staffing, Inc.

ARTICLE II. PRINCIPAL OFFICE AND MAILING ADDRESS

The street address of the principal business office and mailing address of the corporation is:

2154 69th Avenue South
St. Petersburg, Florida 33712

ARTICLE III. CAPITAL STOCK

The number of shares of capital stock that the corporation is authorized to issue is 100 shares of common stock, having a par value of \$1.00 per share.

ARTICLE IV. INITIAL BOARD OF DIRECTORS

The corporation shall have two directors initially. The names and street addresses of the initial directors are:

<u>Name</u>	<u>Address</u>
Jimmy L. Newcomb	2154 69th Avenue South St. Petersburg, Florida 33712
James Newcomb	2154 69th Avenue South St. Petersburg, Florida 33712

ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the corporation is 100 North Tampa Street, Suite 2650, Tampa, Florida

33602, and the name of the corporation's initial registered agent at the address is Jeffery M. Fuller.

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator is:

Jeffery M. Fuller
100 North Tampa Street, Suite 2650
Tampa, Florida 33602

EXECUTION DATE: August 4, 1995



Jeffery M. Fuller
as incorporator

PROFESSIONAL STAFFING, INC.

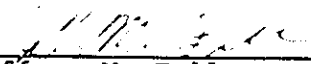
ACCEPTANCE OF REGISTERED AGENT

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the following is submitted:

That Professional Staffing, Inc., desiring to organize as a corporation under the laws of the State of Florida with its initial registered office, as indicated in its Articles of Incorporation, at 100 North Tampa Street, Suite 2650, Tampa, Florida 33602, has named Jeffery M. Fuller as its agent to accept service of process within the State of Florida.

Having been named to accept service of process for Professional Staffing, Inc. at the place designated in this document, the undersigned agrees to act in that capacity and to comply with the provisions of the Florida Business Corporation Act relative to keeping open the registered office. The undersigned is familiar with, and accepts the obligations of, Section 607.0501, Florida Statutes.

EXECUTION DATE: August 4, 1995



Jeffery M. Fuller

FILED
95 AUG -7 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P95000060651

STATE OF FLORIDA
OFFICE OF THE COMPTROLLER
APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury which are subject to refund. The following information is submitted to substantiate the claim.

Name: C T Corporation System EIN or SS# _____

Address: 660 East Jefferson Street
Tallahassee, FL 32301

Amount \$87.50 Date Paid _____

Reason for claim Corporation no longer wishes to file documents for
PROFESSIONAL STAFFING, INC. (P95000060651)

Darlene Connell, Amendment Section

Certified true and correct this 1st day of May, 1997.

Signature: Carrie Payne

* Must be completed if authority is other than Section 215.26, Florida Statutes.

For Agency Use Only

Agency recommends approval of above claim and submits the following information to substantiate the claim: Amount of recommended refund \$ 87.50

The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on State Treasurer's Receipt No. 01054 027 / dated 03/12/97
030

Name of Account _____
45202130001453000000000010000

Statutory Authority for Collection 607.0122

It is requested that payment be made from the following account:

NAME OF ACCOUNT: _____
452021300014530000000022002000

Certified true and correct this _____ day of _____, 19____.

Department of State, Division of Corporations _____
(Agency) (Authorized Signature and Title)

Document Number Only

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

CORPORATION(S) NAME

Professional Learning, Inc.

☐ Profit

☐ NonProfit

☐ Limited Liability Company

☐ Foreign

☐ Amendment

☐ Dissolution/Withdrawal

☐ Merger

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☐ Limited Liability Partnership

☒ Certified Copy

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Other

☒ Change of R.A.

☐ Fictitious Name

☐ CUS

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Call if Problem

☐ Will Wait

☐ After 4:30

☒ Pick Up

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier

PLEASE RETURN EXTRA COPY(S)

FILE STAMPED

3/12/97



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 12, 1997

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: PROFESSIONAL STAFFING, INC.
Ref. Number: P95000060651

We have received your document for PROFESSIONAL STAFFING, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to file your document, the subject entity must first be reinstated.

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 1996 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application/annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$585.00 reinstatement fee, \$61.25 filing fee per year for the years 1996 through the current year, \$103.75 corporate supplemental fee for 1992 and every year thereafter.

Therefore, the total amount due to reinstate the corporation is \$915.00. Add an additional \$8.75 for each certificate of status requested.

The total amount due includes the 1997 Annual Report and Supplemental Fee.

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 (904) 487-6906.

Darlene Connell
Corporate Specialist

Letter Number: 397A00012677