

P960000074182

TRANSMITTAL LETTER

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

200001924178  
03/16/96-01045-016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: OMNISTAFF, INC.  
(Proposed corporate name must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM:

OMNISTAFF, INC.

Name (printed or typed)

55 MIDTOWN PK, E.

Address

MOBILE, AL 36606

City, State & Zip

334-470-0452

Daytime Telephone number

95 SEP -5 PM 2:37

W96-17521

AL SEP 06 1996

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

August 21, 1996

OMNISTAFF, INC.  
55 MIDTOWN PARK EAST  
MOBILE, AL 36606

SUBJECT: OMNISTAFF, INC.  
Ref. Number: W96000017521

We have received your document for OMNISTAFF, 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 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. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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) 487-6928.

Agnes Lunt  
Corporate Specialist

Letter Number: 496A00039723

## ARTICLES OF INCORPORATION

26 SEP -6 PM 2:37

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:

~~CHARTERED~~  
McKINNEY & FOSTER, Inc

### ARTICLE II PRINCIPAL OFFICE

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

55 MIDTOWN PARK, 2005  
MOBILE, AL  
36606

### ARTICLE III SHARES

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

1000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

WE DO NOT HAVE AN OFFICE IN THE  
STATE OF FLORIDA.

PROCESS may be served to:

MR MARK FOSTER

2719 N. P STREET

PENSACOLA, FLORIDA 32505

PHONE # 904-932-7377

**ARTICLE V INCORPORATOR(S)**

See Instructions for officers/directors

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

MR MARK FOSTER  
55 MIDTOWN PARK, EAST  
MOBILE, AL  
36604

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

9 day of AUGUST, 1996.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE:** Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

McKINNEY & Foster Inc

2. The name and address of the registered agent and office is:

R. MARK FOSTER  
(NAME)

2719 N. P STREET  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PENSACOLA, FL 32505  
(CITY/STATE/ZIP)

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*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

R. Mark Foster  
(SIGNATURE)

AUG 28, 1996  
(DATE)