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FROM: EMPIRE CORPORATE KIT COMPANY AOOT#: 072450003255  
CONTACT: RAY STORMONT  
PHONE: (305)541-3694 FAX #: (305)541-3770

NAME: GABLED STAFFING COMPANY, INC/  
AUDIT NUMBER.....H90000012585  
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.  
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**ARTICLES OF INCORPORATION OF  
GABLES STAFFING COMPANY, INC.**

The undersigned, for the purpose of forming a corporation the Florida Business Corporation Act, adopt the following Articles of Incorporation.

**ARTICLE ONE  
NAME**

**GABLES STAFFING COMPANY, INC.**

**ARTICLE TWO  
PRINCIPAL OFFICE**

The street address of the initial principal office of the corporation is 5872 West Flagler Street, Miami, Florida.

The mailing address of the corporation is 5872 West Flagler Street, Miami, Florida

**ARTICLE THREE  
CORPORATE DURATION**

The duration of the corporation is perpetual.

The date and time of the commencement of corporate existence will be on the date of the filing of these Articles of Incorporation.

**RODRIGUEZ & ESTEVEZ  
1250 S.W. 27th Ave, Ste. #301  
Miami, Florida 33135**

*Lisette Rodriguez, Esq.*

By: Lisette Rodriguez, Esq.  
(305) 643-0400  
FBN. 0867100

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**ARTICLE FOUR  
PURPOSE OR PURPOSES**

The general purposes of which the corporation is organized are:

1. To transact any other lawful business for which corporations may be incorporated under the Florida Business Corporation Act or engage in any other trade or business which can, in the opinion of the board of directors of the corporation be advantageously carried on in connection with or auxiliary to the proceeding business.
2. To do such other things as are incidental to the above or necessary or desirable in order to accomplish the above.
3. To do business as leasing company as defined under Florida Statutes 468.520 et seq.

**ARTICLES FIVE  
CAPITALIZATION**

The aggregate amount of the total authorized capital stock of this corporation is 100 (one hundred) shares of common stock which shall be all of the same class. Such stock may be issued from time to time without action by the stockholders, for such consideration as may be fixed from time to time by the board of directors, and shares so issued, the full consideration for which has been paid or delivered, shall be deemed full paid stock and the holder of such shares shall not be liable for any further payment.

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**ARTICLE SIX  
REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the corporation is 5872 West Fingler Street, Miami, Florida, and the name of its initial registered agent at such address, is  
**OVIDIO PENA.**

**ARTICLE SEVEN  
DIRECTORS**

The number of directors constituting the corporation's initial board of directors is one the name and address of each person who is to serve as a member of the initial board of directors is:

Name	Address
<b>OVIDIO PENA</b> President/V. President	<b>13456 N.W. 8 STREET</b> <b>MIAMI, FLORIDA</b>
<b>MARIA L. FERNANDEZ</b> V. President/Secretary	<b>9974 SW 31 Terrace</b> <b>Miami, Florida</b>
<b>JUAN C. ZEQUEIRA</b> Treasurer	<b>898 NW 45TH AVENUE #13</b> <b>Miami, Florida</b>

**ARTICLE EIGHT  
INCORPORATORS**

The name and address of each incorporator is:

Name	Address
<b>OVIDIO PENA</b>	<b>13456 N.W. 8 STREET</b> <b>MIAMI, FLORIDA</b>

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Executed by the undersigned at Miami, Dade County, Florida.

  
\_\_\_\_\_  
Ovidio Pena, Incorporator

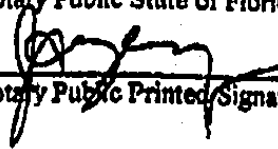
STATE OF FLORIDA

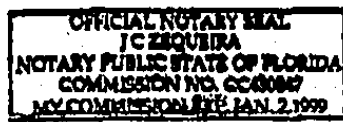
COUNTY OF DADE

Before me the undersigned authority personally appeared Ovidio Pena, after having been identified by Florida Driver's License and having been placed under oath.

SWORN TO AND SUBSCRIBED TO BEFORE ME, this 4 day of Sept, 1996.

Notary Public State of Florida

  
\_\_\_\_\_  
Notary Public Printed Signature



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

Pursuant to the provisions of section 617.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the State of Florida, submit the following statement in designating the registered office/registered agent, in the State of Florida.

First that GABLES STAFFING COMPANY, INC.  
(name of corporation)

desiring to organize under the laws of the State of FLORIDA

with its principal office, as indicated in the articles of incorporation has named OVIDO

PENA  
(Name of Registered Agent)

located at 5872 WEST FLAGLER STREET.

City of MIAMI County of DADE  
(City) (County)

State of Florida, as its agent to accept service of process within this state.

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.

SIGNATURE [Signature]  
Registered Agent

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