

# P97000094593

## TRANSMITTAL LETTER

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

**SUBJECT:** Staflor Services 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:** Danuta Flores  
Name (Printed or typed)

9345 Azalea Ridge Way  
Address

Gotha, FL 34734  
City, State & Zip

407 523-8159  
Daytime Telephone number

600002318726--7  
-10/13/97-01083--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

W97-23365

Dmc  
11/4/97

**FILED**  
97 NOV -3 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

October 13, 1997

DANUTA FLORES  
9345 AZALEA RIDGE WAY  
GOTHA, FL 34734

SUBJECT: STAFLORE SERVICES INC.  
Ref. Number: W97000023365

We have received your document for STAFLORE SERVICES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

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 (850) 487-6092.

Hart Collins  
Senior Corporate Section Administrator

Letter Number: 297A00050071

**FILED**

97 NOV -3 AM 9:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

*The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:  
Staflor Services Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  
9345 Azalea Ridge Way  
Gotha, FL 34734

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  
6,000 shares of stock

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:  
Danuta Flores  
9345 Azalea Ridge Way  
Gotha, FL 34734

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:  
Danuta Flores  
9345 Azalea Ridge Way  
Gotha, FL 34734

*Danuta Flores*

Signature/Incorporator

*10-30-97*

Date

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

*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*

*Danuta Flores*

Signature/Registered Agent

*10-30-97*

Date

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: Danuta Flores

Address: 9345 Azalea Ridge Way

Gotha FL 34734

Vice President: Diane Staszal

Address: 683 Birchwood Drive

Bolingbrook, IL 60490

Secretary: Sergio Flores

Address: 9345 Azalea Ridge Way

Gotha FL 34734

Treasurer: John Staszal

Address: 683 Birchwood Drive

Bolingbrook, IL 60490

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Danuta Flores*  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Danuta Flores - President  
(Typed or printed name and capacity of person signing application)