

P98000094836
TRANSMITTAL LETTER

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

500002682505--4
-11/06/98-01089--004
*****78.75 *****78.75

SUBJECT: Keighbae Hood Staffing Service 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 ☒ \$78.75 ☐ \$122.50 ☐ \$131.25

FROM: Mrs. Lashonda Brown
Name (printed or typed)

6301 Biscayne Blvd Suite 107
Address

Miami, Fl. 33138
City, State & Zip

(305) 751-7444 fax 751-5309
Daytime Telephone number

Lashonda- GAVE

AUTHORIZATION BY PHONE TO

RECEIPT Articles
11/10/98
dm

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

FILED
NOV -6 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16252
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ARTICLES OF INCORPORATION

OF

Neighborhood Staffing Service 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: Neighborhood Staffing Service INC

ARTICLE II PRINCIPAL OFFICE

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

6301 Biscayne Blvd Suite 107
Miami, FL 33138

ARTICLE III SHARES

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

(1) ONE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mrs Lashonda Brown
6301 BISCAYNE BLVD SUITE 107
MIAMI, FL 33138

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

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

Mrs. Lashonda Brown
2860 NW 132 terr
Opa-locka Fl. 33054

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

28th day of October, 1998.

Mrs. Lashonda E. Brown
Signature

Signature

Signature

Articles of Incorporation

Filing Fee - \$35

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: NEIGHBORHOOD STAFFING
SERVICE INC.

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

MRS. Lashonda Brown
(Name)

6301 Biscayne Blvd Suite #107
(P.O. Box not acceptable)

Miami, Fl. 33138
(City/State/Zip)

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.

Mrs. Lashonda Brown
(Signature)

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