

P99000096282

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

SUBJECT: Payroll Plus Benefits of Florida, Inc.  
(Proposed corporate name - must include suffix)

800003029328--8  
-10/29/99-01066-016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
ADDITIONAL COPY REQUIRED

FROM: Joseph Pirolozzi  
Name (Printed or typed)

12536 Bronco Drive  
Address

Tampa, FL 33626  
City, State & Zip

(813) 884-6636  
Daytime Telephone number

FILED  
99 OCT 29 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314

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

11-2  
WC

## 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:

Payroll Plus Benefits of Florida, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

12536 Bronco Drive  
Tampa, FL 33626

### ARTICLE III SHARES

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

#100 shares, Common stock, \$ 1.00 par value

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Joseph Pirolozzi  
12536 Bronco Drive  
Tampa, FL 33626

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Joseph Pirolozzi  
12536 Bronco Drive  
Tampa, FL 33626

  
Signature/Incorporator

10/27/99  
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

  
Signature/Registered Agent

10/27/99  
Date

99 OCT 29 AM 11:55  
FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA