## TRANSMITTAL LETTER

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

000003303090

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

\$70.00

\$78.75

Filing Fee Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: .		DAVID	Cox	
	Name (Printed or typed)			
	1126	25H	Ave N	
	Address		idress	

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be:
LABOR 2000 INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:
15808 Massachusetts Ave New Port Richey FL 34654
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:
Providing femporary Labor to businesses
ARTICLE IV SHARES The number of shares of stock is: /,000
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:
MINDY MESSINA
1808 Massachusetts AVE New Port Richey FL 34654
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
DAVID COX 1126 25 th Ave N
St. Refe FL 33704
**************************************
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
2 n. Minde Messeint 6-17-00

Date Signature/Incorporator
DAUID COX