#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000107064 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205+0380

From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES,

Phone

Account Number: 075350000353

Fax Number

: (212)431-5000 : (212)431-1441

### COR AMND/RESTATE/CORRECT OR O/D RESIGN

### ADECCO HEALTH, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

4/21/2007

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

#### SECTION I (1-3 MUST BE COMPLETED)

(Document number of corporation (if known))		TE NY
		100 S
1. ADECCO HEALTH, INC.		100 00 OO
(Name of corporation as it app	pears on the records of the Department of State)	93
2. NEW YORK	3, 5/5/2003	Dr.
(Incorporated under laws of)	(Date authorized to do busine	ss in Florida)
	SECTION II NLY THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the corporat	tion, when was the change effected unde	r the laws of
its jurisdiction of incorporation? 4/2/2007		ं देश आप्रकार स
5, ADECCO MEDICAL & SCIENCE STAFFING, INC.		24 24 <u>35 3 37 37 27</u>
(Name of corporation after the amendment, adding appropriate abbreviation, if not contained in new to	suffix "corporation," "company," or "in name of the corporation)	scorporated, or
(If new name is unavailable in Florida, enter alterna business in Florida)	te corporate name adopted for the purpo	se of transacting
6. If the amendment changes the period of duration, in	adicate new period of duration.	
	(New duration)	
7. If the amendment changes the jurisdiction of incorp	poration, indicate new jurisdiction.	
	(New jurisdiction)	
(Signature of a director, president or other officer - if of a receiver or other court appointed fiduciary, by the	in the hands (Date at fiduciary)	(07_
DIANA R. KARABELAS	ASSISTANT SECTION (Title of personal control o	
(Typed or printed name of person sig	ming) (attie of person	hit tifums)

## State of New York Department of State State

I hereby certify, that the Cartificate of Incorporation of ADECCO MEDICAL & SCIENCE STAFFING, INC. was filed on 01/31/1986, under the name of TAD HEALTH SERVICES INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

- A Certificate of Amendment was filed on 03/01/1991.
- A Biennial Statement was filed 03/02/1993.
- A Biennial Statement was Filed 03/24/1994.
- A Certificate of Change was filed on 09/16/1999.
- A certificate changing name to ADECCO MEALTH, INC. was filed on 04/30/2003.
- A Biennial Statement was filed 05/14/2003.
- A Biennial Statement was filed 11/02/2005.
- A Biennial Statement was filed 02/16/2006.
- A certificate changing name to ADECCO MEDICAL & SCIENCE STAFFING, INC. was filed on 04/02/2007.

I further certify, that no other documents have been filed by such Corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 20th day of April two thousand and seven.

Daniel Shapiro Special Deputy Secretary of State

200704230087 \* 39