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Florida Department of State  
Division of Corporations  
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Email Address: kgappa@workforceinsight.com

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**WorkForce Insight, Inc.**

Certificate of Status	0
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*MRS 11/2*

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. WorkForce Insight, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Colorado

(State or country under the law of which it is incorporated)

3. 20-4337320

(FEI number, if applicable)

4. 2/20/2006

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 11/1/09

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1600 Wynkoop, Suite 5B, Denver, Colorado 80202

(Principal office address)

1600 Wynkoop, Suite 5B, Denver, Colorado 80202

(Current mailing address)

8. All lawful business

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road,

Plantation, Florida 33324  
(City) (Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Mark Williams

Mark Williams, AVP, C T Corporation System

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

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

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

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

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

Director: Steve Goldman

Address: 1600 Wynkoop, Suite 5B, Denver, Colorado 80202

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

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

B. OFFICERS

President: Steve Goldman

Address: 1600 Wynkoop, Suite 5B, Denver, Colorado 80202

Vice President: \_\_\_\_\_

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


Secretary: Donald Giffels

Address: 1600 Wynkoop, Suite 5B, Denver, Colorado 80202

Treasurer: Donald Giffels

Address: 1600 Wynkoop, Suite 5B, Denver, Colorado 80202

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

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. Steve Goldman, President  
(Typed or printed name and capacity of person signing application)

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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADOSECRETARY OF STATE  
TALLAHASSEE FLORIDA

## CERTIFICATE

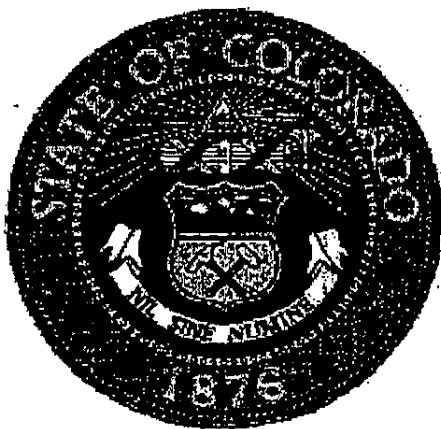
I, Bernie Buescher, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

**Workforce Insight, Inc.**

is a **Corporation** formed or registered on 02/20/2006 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20061074653.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/27/2010 that have been posted, and by documents delivered to this office electronically through 10/29/2010 @ 13:01:46.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 10/29/2010 @ 13:01:46 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 7779692.



Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*

*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/bb/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."*