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ACCOUNT NO. :

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REFERENCE

426568

4813885

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: August 15, 2001

ORDER TIME: 9:57 AM

ORDER NO. : 426568-010

CUSTOMER NO:

4813885

CUSTOMER:

Ken Wagner, Legal Asst

Tannenbaum Helpern Syracuse &

900 Third Avenue

13th Floor

New York, NY 10022-4775

000004542070--0

FOREIGN FILINGS

NAME:

LLOYD STAFFING, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

| , | LLOYD S | STAFFING, INC. | | | | - EG | -11 | | | | |
|--|---|--|---|---|--------------------------------|---|------------------|--|--|--|--|
| 1. | (Name of corpora words or abbrevi | ation; must include the word "Il ations of like import in languag partnership if not so contained | e as will clearly inc | dicate that it is | | TION TO THE STATE OF THE STATE | NED PH 12: 48 | | | | |
| 2. | New Yor | | 3 | 11-2579 | | FLOST | ন্ত | | | | |
| | (State or country under the law of which it is incorporated) | | | (F | EI number, if a | pplicable) 릴류 | 0 | | | | |
| 4. | October | 1, 1981 | 5 | Perpeti | ıal | | | | | | |
| | (Date | of incorporation) | (I | Duration: Year | corp. will cease | e to exist or "perp | etual") | | | | |
| 6. | | alification | | | | | - - | | | | |
| (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) | | | | | | | | | | | |
| 7. | 445 Bro | adhollow Road, Suite | 119, Melvill | e, NY 1174 | 47 | | · , , . | | | | |
| (Principal office address) | | | | | | | | | | | |
| | 445 Broadhollow Road, Suite 119, Melville, NY 11747 | | | | | | | | | | |
| | | (Curr | ent mailing address | 5) | | _ | | | | | |
| 8. | Staffir | ıg services | | <u> </u> | | | | | | | |
| | (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 or Mail Drop Box NOT acceptable) | | | | | | | | | | | |
| | Name: | Corporation Service | _ | _ | - | - | · · | | | | |
| 0 | ffice Address: | 1201 Hays Street | | | | - - | | | | | |
| | | | | , Florida _ | 32301 | | | | | | |
| | | (City) | | | (Zip code) | | | | | | |
| H de fa | laving been name esignated in this arther agree to c | gent's acceptance: ned as registered agent and s application, I hereby accept comply with the provisions of familiar with and accept the | of the appointment of all statutes related by the statutes of | nt as register ative to the p ny position a | red agent and roper and con | agree to act in t aplete performa | this capacity. I | | | | |
| | (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.

| A. DIRECTOF | | |
|---------------------------|--|---------------|
| Chairman: | Merrill Banks | |
| Address: | 445 Broadhollow Road, Suite 119 | |
| | Melville, NY 11747 | <u></u> |
| Director VKEVNERNER_ | Keith Banks | |
| Address: | σ . \circ | O |
| | Melville, NY 11747 | |
| Director: | Jason Banks | р — |
| Address: | 445 Broadhollow Road, Suite 119 | |
| | Melville, NY 11747 | |
| Director: | Vincent J. Albanese | |
| Address: | 445 Broadhollow Road, Suite 119 | |
| | Melville, NY 11747 | |
| B. OFFICERS | S | |
| President: | Merrill Banks | |
| Address: | 445 Broadhollow Road, Suite 119 | |
| | Melville, NY 11747 | |
| Executive Vice President: | Keith Banks | |
| Address: | 445 Broadhollow Road, Suite 119 | - |
| <u></u> | Melville, NY 11747 | |
| Secretary: | Merrill Banks | |
| Address: | 445 Broadhollow Road, Suite 119, Melville, NY 11747 | |
| CFO | Vincent J. Albanese | |
| Address: | 445 Broadhollow Road, Suite 119, Melville, NY 11747 | |
| NOTE: If nec | cessary, you may attach an addendum to the application listing additional officers and/or director | |
| | Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) | |
| 14 | Merrill Banks, President (Typed or printed name and capacity of person signing application) | |

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of LLOYD STAFFING, INC. was filed on 10/01/1981, under the name of LLOYD PRIME TEMPORARIES, 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 a subsisting corporation.

A Certificate of Amendment LLOYD PRIME TEMPORARIES, INC., changing name to LLOYD CREATIVE TEMPORARIES, INC., was filed 10/06/1981.

A Certificate of Amendment LLOYD CREATIVE TEMPORARIES, INC., changing name to LLOYD STAFFING, INC., was filed 06/29/2001.

> is my hand and the official seal Department of State at the City this 15th day of August ousand and one.

цty Secretary of State

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