

# F02000002546

CORPORATION(S) NAME

(1) Hobbs Staffing Services, Inc.

~~(2) Hobbs Staffing Services, Inc.~~

~~Hobbs Staffing Services, Inc.~~

FILED  
02 MAY 22 AM 1:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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05/22/02 01038--024  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

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|--|---|---|
| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit                 |   |   |
| <input checked="" type="checkbox"/> Foreign        | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement          |   |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                       | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready           | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In        | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                  |   |   |

**BK**

Name \_\_\_\_\_  
 Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_

5/22/02

File 1 st

Order#: 5271290  
 Ref#: \_\_\_\_\_  
 Amount: \$ \_\_\_\_\_

RECEIVED  
 02 MAY 22 AM 11:14  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

300005597599--0  
05/22/02 01038--023  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

660 East Jefferson Street  
 Tallahassee, FL 32301  
 Tel. 850 222 1092  
 Fax 850 222 7615

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

FILED  
MAY 22 PM 1:24  
SECRETARY OF STATE  
TALLAHASSEE, 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. Hobbs Staffing Services, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Tennessee 3. 62-1236734  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 7, 1985 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Quab.  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 307 S. Swing Road  
Greensboro, North Carolina 27409  
(Current mailing address)

8. To provide temporary staffing services  
(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: C T Corporation System

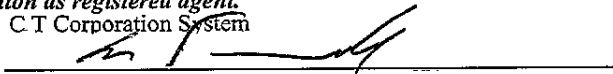
Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324  
(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.*

C T Corporation System



(Registered agent's signature)

Allan Farnell

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.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: Bruce Gregory Harrison

Address: 307 S. Swing Road

Greensboro, North Carolina 27409

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

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

Director: R. Jack Hobbs

Address: 307 S. Swing Road

Greensboro, North Carolina 27409

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

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

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: R. Jack Hobbs

Address: 307 S. Swing Road

Greensboro, North Carolina 27409

Vice President: Bruce Gregory Harrison, Chief Executive Officer

Address: 307 S. Swing Road

Greensboro, North Carolina 27409

Secretary: Allison C. Ray, Chief Financial Officer and Secretary

Address: 7057-B West Friendly Avenue

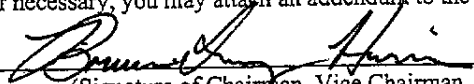
Greensboro, North Carolina 27410

Treasurer: William R. McDaniel, Chief Operations Officer

Address: 2778 Rideout Lane, G-703

Murfreesboro, Tennessee 37128

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

13. ✓   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Bruce Gregory Harrison, Chairman of Board of Directors  
(Typed or printed name and capacity of person signing application)

02 MAY 22 PM 1:24  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Secretary of State**  
**Division of Business Services**

**312 Eighth Avenue North**  
**6th Floor, William R. Snodgrass Tower**  
**Nashville, Tennessee 37243**

ISSUANCE DATE: 05/21/2002  
REQUEST NUMBER: 02141539  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 05/07/1985  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0155955  
JURISDICTION: TENNESSEE

02 MAY 22 PM 1:24  
SECRETARY OF STATE  
NASHVILLE, FLORIDA  
FILED

TO:  
CFS  
8161 HWY 100  
NASHVILLE, TN 37221

REQUESTED BY:  
CFS  
8161 HWY 100  
NASHVILLE, TN 37221

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT  
"HOBBS STAFFING SERVICES, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS NOT BEEN FILED WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/21/02

FROM:  
CFS  
8161 HIGHWAY 100  
#172  
NASHVILLE, TN 37221-0000

	FEE	
RECEIVED:	\$100.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$100.00

RECEIPT NUMBER: 00003091532  
ACCOUNT NUMBER: 00101230

*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE

