F0500000 4046

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filling Officer:	
	Office Use Only	v



100055958051

07/14/05--01044--009 **78.75

OS JUL 14 PM 4: 30
TALLAHASSEF FLORIDA

CT CORPORATION

July 14, 2005

Department of State, Florida 409 East Gaines Street Tallahassee FL 32399



Re:

Order #: 6408029 SO

Customer Reference 1:

Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

U.S. Staffing of Florida, Inc. (NC) Qualification Florida

U.S. Staffing of Florida, Inc. (NC) Certificate of Status/Authorization-Foreign Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

1203 Governors Square Boulevard Tallahassee, FL 32301-2960 Tel. 850 222 1092 Fax 850 222 7615 **CT** CORPORATION

-Sincerely,

Jennifer Murphy

Fulfillment Specialist Jennifer_Murphy@cch-lis.com ALL THE PARTY OF T

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

U.S. Staffing of	Florida, Inc.	STATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDAL OF TOM PANY," "CORPORATION,"
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")	
		Oplice Control of the
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)
2. North Carolina	3	20-2971346
·	under the law of which it is incorporated)	(FEI number, if applicable)
, 9-28-04	5	perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
5. 2-18-05		
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
307 South Swin	g Road, Greensboro, North Carolina 274	
	(Principal office ad	dress)
P.O. Box 18944	, Greensboro, North Carolina 27419	
	(Current mailing ad	ldress)
"For All Lawful	Business Purposes"	
'·	s) of corporation authorized in home state or	country to be carried out in state of Florida)
. Name and stree	et 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)
0. Registered as	gent's acceptance:	(Zip code)
Having been nam lesignated in this	gent's acceptance: led as registered agent and to accept ser application, I hereby accept the appoint	(Zip code) vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. I
Having been nam lesignated in this urther agree to c	gent's acceptance: ned as registered agent and to accept ser application, I hereby accept the appoint omply with the provisions of all statutes	(Zip code) vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my dutie.
Having been nam designated in this further agree to c	gent's acceptance: led as registered agent and to accept ser application, I hereby accept the appoint	(Zip code) vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my dutie.
Having been nam lesignated in this further agree to c	gent's acceptance: ned as registered agent and to accept served application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my p	(Zip code) vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my dutie

- 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 business addresses of officers and/or directors:

A. DIKE	CTORS
Chairman:	Greg Harrison
Address:	307 South Swing Road
_	Greensboro, NC 27409
Vice Chair	rman:
Address:	
_	
Director:	Ray McDaniel
Address:	307 South Swing Road
-	Greensboro, NC 27409
Director:	Mark Griffin
Address:	307 South Swing Road
	Greensboro, NC 27409
B. OFFI	CERS
President:	Greg Harrison, President
	307 South Swing Road
_	Greensboro, NC 27409
- Vice Presid	dent: Ray McDaniel, Chief Operations Officer
Address: _	307 South Swing Road
-	Greensboro, NC 27409
Secretary:	Mark Griffin, Secretary-General Counsel
•	307 South Swing Road, Greensboro, NC 27409
Address: _	
-	
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	Mel f. d
	(Signature of Director or Officer listed in number 12 of the application)
14. <u>Mark</u>	Griffin, Secretary-General Counsel (Typed or printed name and capacity of person signing application)
	(-1 Lan or browned more antenned or bernow returne abbreamon)



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

U. S. STAFFING OF FLORIDA, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 28th day of September, 2004, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 11th day of July, 2005

Claim 4. Marshall.

Secretary of State