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FOREIGN PROFIT/NONPROFIT CORPORATION

CS Staffing, Incorporated

Certificate of Status	1
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**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. C S Staffing, Incorporated

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION"
"Inc.", "Co.", "Corp.", "Ltd.", "Co.", or "Corp.")

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

2. Michigan

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

3. 20-1267216

(FEI number, if applicable)

4. June 15, 2004

(Date of incorporation)

5. Perpetual

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

6. _____

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

7. 10801 S. Saginaw St., Suite A, Grand Blanc, MI 48439

(Principal office address)

10801 S. Saginaw St., Suite A, Grand Blanc, MI 48439

(Current mailing address)

8. Temporary Staffing Service

(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: Margaret Chisholm

Office Address: 7558 SW 61st Ave., Suite 2

Ocala

(City)

, Florida, 34476

(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.

Margaret Chisholm
(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 addresses of officers and/or directors:

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

Chairman: **Thomas Self**

Address: **10801 S. Saginaw St., Suite A**
Grand Blanc, MI 48439

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: **Thomas Self**

Address: **10801 S. Saginaw St., Suite A**
Grand Blanc, MI 48439

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

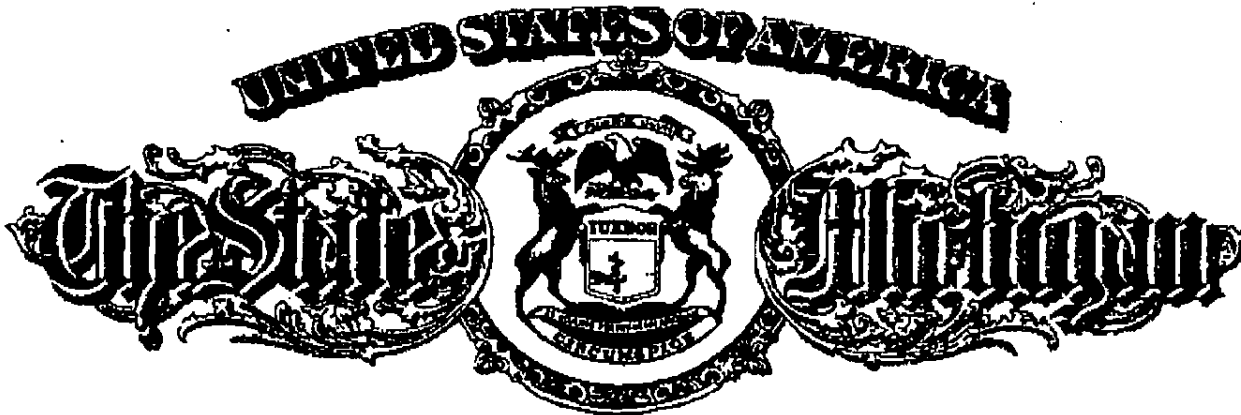
Address: _____

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

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

14. **Thomas Self - President**
(Typed or printed name and capacity of person signing application)

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This is to Certify That

C S STAFFING INCORPORATED

a Michigan profit corporation was validly incorporated on June 15, 2004, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 1st day of May, 2008.

Andrew J. Stelly, Director

Bureau of Commercial Services