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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

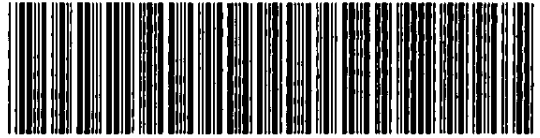
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Samula White **NAME**
AUTHORIZATION BY PHONE TO
CORRECT *Add alternate name &*
DATE *11/17/09* *perpetual*
DOC. ENM *MRD*

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UH

100-50498

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: STAFF USA, INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Matteo Comunalazzi
Name of Person

STAFF USA, INC.
Firm/Company

220 W 19th St., 11th Floor
Address

New York, NY 10011
City/State and Zip code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (046) 613-8457 ext. 482
Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Cop ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2009

MATTEE COMUNALAZZI
220 W 19TH ST., 11TH FLOOR
NEW YORK, NY 10011

SUBJECT: STAFF USA INC.
Ref. Number: W09000050498

We have received your document for STAFF USA INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 809A00035680

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

STAFFUSA INC. MAISON MARTIN MARGIELA
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 20-2909010
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 23, 2005 5. perpetual
(Date of incorporation) (Duration Year corp. will cease to exist or "perpetual")

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

7. Melin Building 3930 NE 2nd Ave #101 Miami FL 33137
(Principal office address)
220 W 19th St, 11th Floor, NY NY 10011
(Current mailing address)

8. Retail Store - Apparel & Accessories
(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: Melin Building

Office Address: 3930 NE 2nd Ave, #101

Miami, FL, Florida 33137
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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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.

Matteo Comunalazzi - Treasurer
(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Ubaldo Minelli

Address: Viale Del Progresso, 10 36025 Noventa Vicentina
Italy c/o Staff International

Vice Chairman: _____

Address: _____

Director: Marina Tosin

Address: Via Del Progresso, 10 36025 Noventa Vicentina (IT)
Italy c/o Staff International

Director: Monica Voltolina

Address: 220 W 19th Street, 11th Floor NY NY 10011

B. OFFICERS

President: Ubaldo Minelli

Address: Viale Del Progresso, 10 36025 Noventa Vicentina
Italy c/o Staff International

Vice President: _____

Address: _____

Secretary: Matteo Comunalazzi

Address: 220 W 19th St, 11th Floor NY NY 10011

Treasurer: Matteo Comunalazzi

Address: 220 W 19th St, 11th Floor NY NY 10011

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.

MATTEO COMUNALAZZI - TREASURER

(Typed or printed name and capacity of person signing application)

Delaware

The First State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STAFF USA INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF NOVEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STAFF USA INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.


AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



3971623 8300

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You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7628884

DATE: 11-06-09