TO: Qualification/Tax Lien Section Division of Corporations

SUBJECT:	Paramount	Staffing Inc.			
	(1)	lame of corporation - must in	nclude suffix)		
Dear Sir or l	Madam:		100	0002528 -05/19/98- ******70.00	3 <b>201</b> 2 01011003   *****70.00
Florida", "C	d "Application by For ertificate of Existence oration to transact by	oreign Corporation for A e", and check are submassiness in Florida.	authorization to Tra itted to register the	nsact Business above reference	in ed .
Please return	all correspondence	concerning this matter t	to the following:		
		_	J		
	Pamela L. Clari			rvinsk	
		(Name of Person)			98
	Schoenberg, Fish	ner, Newman & Rosen	, =		
		(Firm/Company)	•	(2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	<u></u> σ ;
	222 S. Riverside				2 50
		(Address)			88 22 = 1
	Chicago, IL. 606	506		= = = = = = = = = = = = = = = = = = =	<b>a</b>
		(City/State/Zip)	1	<u></u>	
Should you r	need to call someone	concerning this matter,	please call:		
	Pam Clark		at ( 312 )	648-23000	
(Nam	e of Person)	<del> </del>	at () (Area Code & Day	}	limber)
<u>_</u>			(2 sen con celle)	Tarina i i i i i i i i i i i i i i i i i i	
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### **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 officer directors pame as F98-157

# 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	Doromount Stoff	ina Ina		
Ι.	Paramount Staff	the read "INCO"	PORATED', "COMPANY", "CORPO	ND ATTECNME
	words or abbreviations of like impo	art in language as v	ill clearly indicate that it is a comorat	JKALIUN or ion instead of a
	natural person or partnership if no	t so contained in th	vill clearly indicate that it is a corporate name at present.)	Car in Success Cr ta
2.	Illinois		36-4212176	
۷,	(State or country under the law of s	which it is income	3. <u>36-4212176</u> (FEI number,	if amiliashia\
	Commo de country de la les	ATTICULTY IN HEATTAN	(11111111111111111111111111111111111111	, п арысаже)
_				
4.	February 6, 1998		5Perpetual (Duration: Year corp. will co	
	(Date of Incorporation)		(Duration: Year corp. will ce	ase to exist or
			"perpetual")	Years &
				20
6.	May 1, 1998			F6 8
	(Date first transacted business:	in Florida. (SEE SE	TTIONS 607.1501, 607.1502, AND 817.1	.55, F.S.) ≅
	3100 Dundee Road, Sui			
/,	Jacob Bondon House, But			25 3
	Northbrook, IL. 60062			
	· · · · · · · · · · · · · · · · · · ·	(Current m	iling address)	0 - N
		·	,	
0	To opened in the busi			<b>3</b>
о.	(Purcee(s) of correction authori	zed in home state	rary staffing recountry to be carried out in the state	of Florida)
	(* aspeco(s) as cosperantes: annex.	ZXI IIII III SKIIC (	a country to be carried out in the state	Of Fiorica)
9.	Name and street address of I	lorida register	ed agent: (P.O. Box or Mail Dr	op Box NOT
	acceptable)	Ü	J (	· ——
	Name: CT Cor	poration Syst	em	
	Office Address:	1200 S. Pine	Island Rd.	
	Office Address:	1200 0. 12110	Totalia ia.	
		Plantation	22	22%
		- Tantation	, Florida , 33	324
10	. Registered agent's acceptar	1001	(2	Zip Code)
10	. Registered agent 5 acceptai	ice:		
На	ving been named as register	ed agent and th	accept service of process for	the above stated
co	rporation at the place design	nated in this d	pplication, I hereby accept th	e appointment as
reş	gisterea agent ana agree to act	in this capacit	. I turther agree to comply with	h the provisions of
au	statutes relative to the proper	and complete	performance of my duties, and	I am familiar with
an	d accept the obligations of my			-
		$-\Omega$		
	(l'ns	en Toll	amor	
		1C. TO	gent's signature)	
11				_
11.	Anached is a certificate of ex	istence duly aut	nenticated, not more than 90 day	s prior to
	CHAILLIGHTE OF TOTO OPPOINTANT FA			
	official having spate de of a con-	the Department	of State, by the Secretary of State the jurisdiction under the law of	te or other

incorporated.

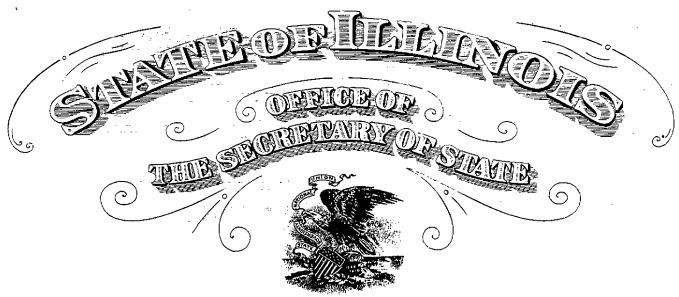
i i

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

A.	DIREC	TORS (St	reet addr	ess only	- P. O . Box NOT acceptable)
Cha	irman: _	None			

Address: _		
Vice Chairn Address:	nan: None	
Director: _	Matthew Schubert	<u> </u>
Address:	3100 Dundee Rd., Suite 301	10-10-1
_	Northbrook, IL. 60062	
Director: _		70.0
Address:		EG 8
		<b>3 5 5 5</b>
B. OFFICE	ERS (Street address only- P. O. Box NOT acceptable)	70 O
President:	Matthew Schubert	He R
_	3100 Dundee Rd., Suite 301	
	Northbrook, IL. 60062	2.4°
Vice Preside	ent: None	
Address:		
Secretary: _	Matthew Schubert	<del></del>
Address:	3100 Dundee Rd., Suite 301	
	Northbrook, IL. 60062	
Treasurer:	Matthew Schubert	
Address:	3100 Dundee Rd., Suite 301	
	Northbrook, IL. 60062	
NOTE: If rofficers and	necessary, you may attach an addendum to the application listing for directors.  When he was a stack an addendum to the application listing for directors.  When he was a stack and a stac	
14. <u>Matt</u>	hew Schubert, President	

## File Number 5979-544-9



## To all to whom these presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,



In Te	stimony Wi	perrol, I hereto set
my hand	and cause to be	affixed the Great Seal of
the State of	'Illinois this	12TH
day of	MAY	A.D., 19_98.

George H Ryan SECRETARY OF STATE