



L020000003948

ACCOUNT NO. : 072100000032

REFERENCE : 514008 7314705

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 125.00

ORDER DATE : February 10, 2002

ORDER TIME : 9:28 AM

ORDER NO. : 514008-001

CUSTOMER NO: 7314705

CUSTOMER: Mr. Curt A. Cavins
Mr. Curt A. Cavins

2116 Park Forest Court

Orange Park, FL 32003

RECEIVED
02 FEB 19 PM 1:01
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: IDEA STAFFING, LLC

900004955148-3

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS:

APPROVED
AND
FILED
02 FEB 19 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
[Signature]

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IDEA STAFFING, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

2116 PARK FOREST COURT, ORANGE PARK, FL 32003

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32301

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Corporation Service Company

By: Deborah D. Skipper

Registered Agent's Signature

Deborah D. Skipper

Asst. V. Pres.

Article IV - Management (Check box if applicable.)

- ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Deborah D. Skipper

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DEBORAH D. SKIPPER

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 19 PM 2:15

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AND
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IDEA STAFFING, LLC

MANAGER LIST

CURT A. CAVINS
2116 PARK FOREST COURT
ORANGE PARK, FL 32003

SHARON M. CAVINS
2116 PARK FOREST COURT
ORANGE PARK, FL 32003

sxk

APPROVED
AND
FILED

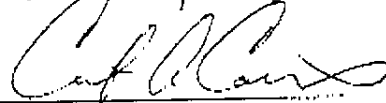
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of IDEA STAFFING, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 18 day of February 2002

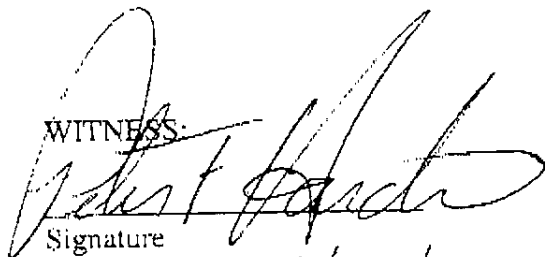


Signature

Curt A. Cavins

Print Name of Signer

WITNESS:

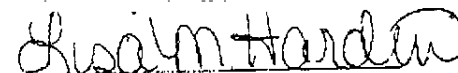


Signature

Peter F. Hardin

Print Name of Witness

WITNESS:



Signature

Lisa M. Hardin

Print Name of Witness

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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