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D. SCOTT MAR 1 2017

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	CERTIFIED COPY		
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ХХ	FILING	LLC	
•	ATRIUM STAFFING OF NEW JE	RSEY LLC	
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PECIAI	L INSTRUCTIONS:		
			P. SCOTT

COVER LETTER

TO:	Registration Section Division of Corporatio	ns			
SUBJE	Atrium Staffing of	New Jersey LLC			
SCDJE	· · · · · · · · · · · · · · · · · · ·	Name of	Limited Liability	Company	•
The end Existent	losed "Application by Fo	reign Limited Liability Comp ed to register the above refer	pany for Authoriz enced foreign limi	ation to Transact Business in Florida, ited liability company to transact busin	' Certificate of ness in Florida.
Please r	eturn all correspondence	concerning this matter to the	following:		
	Mackenzie Ha	rt			_
	Name of Person				
	Registered Agent Solutions, Inc.				
	Firm/Company				
	1701 Directors Blvd., Suite 300				_
	Address				
	Austin, TX 78744 City/State and Zip Code				
	kconoway@atri	•	nac and sap con-	•	
	:	E-mail address: (to be use	d for fittire annua	l report notification)	_
For furt	her information concerni	ig this matter, please call:			
	Mackenzie Hart		88B at (705-7274	
	Name	of Contact Person	Area Code	Daytime Telephone Number	-
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661: Executive Center Circle Tallahassee, FL 32301	
Enclose	d is a check for the follow \$ 125.00 Filing Fee	ring amount: \$\textstyle \text{\$130.00 Filing Fee & Certificate of Status}\$	□ \$155.00 Fili Certified Copy		17 FEB 28 MI 8
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLEINCE WITH SECTION 6030902 FLORIDA STATUTES, THE FOLLOHING IS SUBMITTED TO REGISTER A FOREXCIV LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Atrium Staffing of New Jersey LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company: "L.L.C," or "Ll.C.") 2. New Jersey 01-0636629 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 71 Fifth Ave, Floor 3, New York, NY 10003 (Street Address of Principal Office) 625 LIBERTY AVE, STE 200, PITTSBURGH PA 15222 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agent Solutions, Inc. Name; 155 Office Plaza Dr. Suite A Office Address: Taliahassee. , Florida 32301 (Ciry) Registered agent's acceptance: 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 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. Jaclyn Wright, Asst. Secretary 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Rebecça Cenni, Member - 108 Reade St. #5W, New York, NY 10013 Adrian Cenni, Member - 5000 Estate Enighed #358, St. John, USVI 00831 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. If the conflicate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 2.2

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Rebecca Cenni, Member and CEO

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

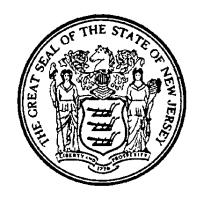
ATRIUM STAFFING OF NEW JERSEY, L.L.C. 0600136236

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on March 18, 2002.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

REGISTERED AGENT SOLUTIONS, INC 208 WEST STATE STREET TRENTON, NJ 08608



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 27th day of February, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6077931167

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

FILED

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SECRETARY OF STATE
MINASSEE, PLOREDA