2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000071166

Entity Name: CAPITAL STAFFING SOLUTIONS INC.

FILED Mar 06, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4720 SALISBURY RD STE 208 7751 BELFORT PARKWAY JACKSONVILLE, FL 32256

SUITE 305

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

7751 BELFORT PARKWAY P.O. BOX 550714 JACKSONVILLE, FL 32255

SUITE 305 JACKSONVILLE, FL 32256

FEI Number: 30-0174422 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PATTERSON, CHRIS 2 SOUTH ROSCOE BLVD. PONTE VEDRA, FL 32082 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHRIS PATTERSON

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete Title: (X) Change () Addition

CAMPBELL, ALEX CAMPBELL, ALEX Name: Name:

7751 BELFORT PARKWAY, SUITE 305 4720 SALISBURY RD STE 208 Address: Address:

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: () Delete Title: TS (X) Change () Addition

CAMPBELL, ALEX CAMPBELL, ALEX Name: Name:

4720 SALISBURY RD STE 208 Address: 7751 BELFORT PARKWAY, SUITE 305 Address:

JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEX CAMPBELL CEO 03/06/2007