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(Requestor's Name)				
(Address)				
(Address)				
(City (Chata (Zin (Dhana a 4)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SEURETARY OF STATE
ALLAHASSEE, FLORIDA



A TEMPORARY STAFFING INC.

160 Broadway, 2nd Floor New York, NY 10038 T 212-346-7960 F 212-346-9601

VIA FEDERAL EXPRESS:

September 28, 2012

Florida Division of Corporations Amendement Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: Articles of Dissolution for A Temporary Staffing, Inc.

To Whom It May Concern:

Attached are the following forms:

- 1. Cover Letter and Articles of Dissolution
- 2. \$52.50 check made payable to Florida Division of Corporations

If you require any additional information please contact me at 212-346-7960 ext. 367 or jcolon@tristatepeo.com

Thank you,

Janet Colon

Legal Dept.

Enc.

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department	ent of Sta	te:	
	A TEMPORARY STAFFING INC			
SECOND:	The document number of the corporation (if known): P09000102	 376		
THIRD:	The file date of the articles of incorporation: 12/22/2009			
FOURTH:	(CHECK AT LEAST ONE BOX)			
	None of the corporation's shares have been issued.			
	The corporation has not commenced business.			
FIFTH:	No debt of the corporation remains unpaid.			
SIXTH:	The net assets of the corporation remaining after winding up have been deto the shareholders, if shares were issued.	istributed		
SEVENTH:	Adoption of Dissolution (CHECK ONE)		•	
	A majority of the incorporators authorized the dissolution.	SEI	72	
	A majority of the directors authorized the dissolution.	CRETARY .AHASSEI	12 OCT - I	7
a.		40.7 71.8	₩ ₩	つ
Sign	ature: (By a director, president or other officer - if directors or officers have not been selected, by in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	an incorpora	itor - if	•
	ROBERT CASSERA			
	(Typed or printed name of person signing) PRESIDENT/DIRECTOR			
	(Title of Person Signing)			

Filing Fee: \$35