

State of Idaho

Office of the Secretary of State

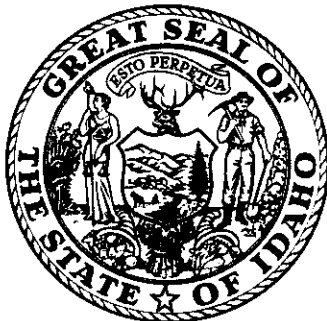
**CERTIFICATE OF AUTHORITY
OF
INNOVATION ASSOCIATES PROFESSIONAL PLACEMENT, INC.**

File Number C 160727

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: 26 May 2005



Ben Yursa
SECRETARY OF STATE

By *A. Gleason*

FILED EFFECTIVE



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2005 MAY 26 AM 9:37

STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

1. The name of the corporation is:

Innovation Associates Professional Placement, Inc.

2. The name which it shall use in Idaho is:
- Innovation Associates Professional Placement, Inc.

3. It is incorporated under the laws of:
- New York State

4. Its date of incorporation is:
- 11/26/97

5. The address of its principal office is:

627 Field Street Johnson City NY 13790

6. The address to which correspondence should be addressed, if different from item 5, is:

7. The street address of its registered office in Idaho is:
- 300 North Sixth St Boise ID 83702

and its registered agent in Idaho at that address is: CT Corporation System

8. The names and respective business addresses of its directors and officers are:

Name	Office	Address
<u>Nancy Boyer, President</u>	<u>Corporate</u>	<u>627 Field Street Johnson City NY 13790</u>
<u>Joseph H. Boyer, Secretary</u>	<u>Corporate</u>	<u>627 Field Street Johnson City NY 13790</u>
<u>Mary Reno, CEO</u>	<u>Corporate</u>	<u>627 Field Street Johnson City NY 13790</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 05/04/05

Signature: _____

Typed Name: Mary RenoCapacity: CEO

Customer Acct #:

(if using pre-paid account)

Secretary of State use only

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 Revised 07/2002

Web Form

 IDAHO SECRETARY OF STATE
 05/26/2005 05:00
 CX: 3707 CT: 189159 IN: 812769
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C 160727

State of New York } **ss:**
Department of State

I hereby certify, that the Certificate of Incorporation of INNOVATION ASSOCIATES PROFESSIONAL PLACEMENT, INC. was filed on 11/26/1997, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 10th day of May
two thousand and five.*

A handwritten signature in black ink, appearing to read "R. A. DeS." with a stylized flourish at the end.

Secretary of State

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