

State of Idaho

Department of State

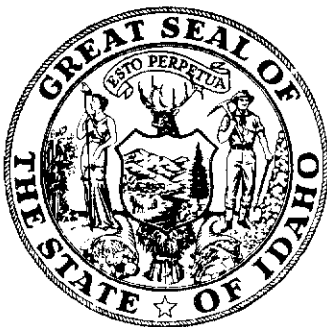
CERTIFICATE OF AUTHORITY OF

MAXIM HEALTHCARE SERVICES, INC.
File number C 119371

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of MAXIM HEALTHCARE SERVICES, INC. for a Certificate of Authority to transact business in this State, duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to MAXIM HEALTHCARE SERVICES, INC. to transact business in this State under the name MAXIM HEALTHCARE SERVICES, INC. and attach hereto a duplicate original of the Application for such Certificate.

Dated: May 5, 1997



Pete T. Cenarrusa
SECRETARY OF STATE

By *Sheryl Dubois*

APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

To the Secretary of State of Idaho

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

97 MAY -5 AM 11:14

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the corporation is MAXIM HEALTHCARE SERVICES, INC.
2. The name which it shall use in Idaho is MAXIM HEALTHCARE SERVICES, INC.
3. It is incorporated under the laws of MARYLAND
4. Its date of incorporation is SEPT 2, 1988 and its duration, if other than perpetual, is _____
5. The address of its principal office in the state or country under the laws of which it is incorporated is
7301 PARKWAY DRIVE, MAIL STOP 250; HANOVER, MARYLAND 21076
6. The address to which correspondence should be addressed, if different than item 5, is _____
7. The street address of its registered office in Idaho is 200 NORTH 23RD ST; BOISE, IDAHO 83702
_____, and its registered agent in Idaho at that address is CORPORATION SERVICE CENTER
8. The purpose or purposes which it is proposed to pursue in the transaction of business in Idaho are:
TEMPORARY MEDICAL SERVICES
9. The names and respective addresses of its directors and officers are:

Name	Office	Address
*** SEE ATTACHED ***		

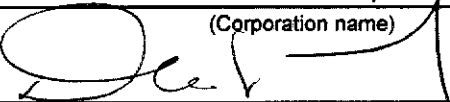
10. The corporation accepts and shall comply with the Constitution and the laws of the State of Idaho.

Dated: 4/29/97

MAXIM HEALTHCARE SERVICES, INC.

(Corporation name)

By



Its President, Vice President, Secretary or Assistant Secretary
(please specify)

CONTROLLER

Revised 7/96
g:\corplforms\ACA.pmg

IDAHO SECRETARY OF STATE
Secretary of State use only
DATE 05/05/1997
0900 89326 2
CK #: 234096 CUST# 80885
AUTH PRD 1@ 100.00= 100.00
CORP SUR 1@ 20.00= 20.00

: C

Maxim Healthcare Service Inc.

Name, Social Security No., Address, and Title of each officer and director.

Name	Social Security No.	Mailing Address	Title
STEPHEN J. BISCOTTI	220-60-8807	7301 PARKWAY DR. HANOVER, MD. 21075	PRESIDENT
JAMES C. DAVIS	194-52-4954	7301 PARKWAY DR. HANOVER, MD. 21075	SECRETARY/TREASURER
DAVID FRANCHAK	219-92-4050	7301 PARKWAY DR. MAIL STOP 250 HANOVER, MD. 21076	CONTROLLER

97 MAY -5 AM 11:17
SECRETARY OF STATE
STATE OF IDAHO

STATE OF MARYLAND

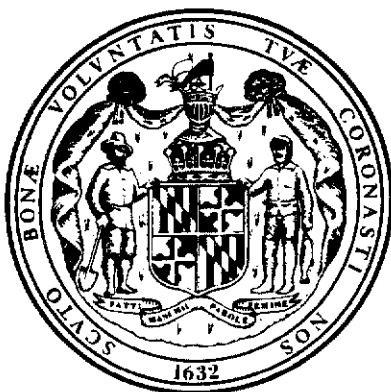
526023

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

I, NANCY GRUENINGER OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT MAXIM HEALTHCARE SERVICES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE STATE OF MARYLAND.



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 23RD DAY OF APRIL, 1997.

Nancy Grueninger
NANCY GRUENINGER
ADMINISTRATIVE OFFICER