

# State of Idaho

Office of the Secretary of State

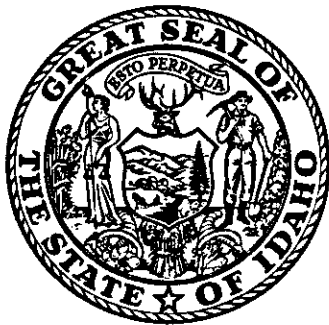
**CERTIFICATE OF AUTHORITY  
OF  
STAFFLINK OUTSOURCING IV, INC.**

File Number C 168826

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: September 12, 2006



*Ben Yursa*

SECRETARY OF STATE

By

*[Signature]*

FILED EFFECTIVE

SL4 ID p 162



# APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2006 SEP 12 PM 12:19

SECRETARY OF STATE  
STATE OF IDAHO

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

1. The name of the corporation is:

STAFFLINK OUTSOURCING, IV, INC.2. The name which it shall use in Idaho is: (SAME)3. It is incorporated under the laws of: FLORIDA4. Its date of incorporation is: 6/23/99

5. The address of its principal office is:

1776 N. PINE ISLAND ROAD SUITE 108, PLANTATION FL 33322

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

(SAME)7. The street address of its registered office in Idaho is: 1401 SHORELINE DR SUITE 2, BOISE ID 83702  
and its registered agent in Idaho at that address is: CORPORATION SERVICE COMPANY

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

| Name                     | Office           | Address  |
|--------------------------|------------------|--|
| <u>ABRAM FINKELSTEIN</u> | <u>PRESIDENT</u> | <u>1776 N. PINE ISLAND RD, STE 108</u><br><u>PLANTATION FL 33322</u> |
| _____                    | _____            | _____  |
| _____                    | _____            | _____  |
| _____                    | _____            | _____  |
| _____                    | _____            | _____  |
| _____                    | _____            | _____  |

Dated: 8/31/06Signature: (X) [Signature]Typed Name: ABRAM FINKELSTEINCapacity: PRESIDENT  
[The signer must be a director or an officer of the corporation.]

Customer Acct #:

(if using pre-paid account)

Secretary of State use only

 G:\Corporations  
 SampleApplicationAuthority\_090106.doc  
 Revised 05/02/05

 IDAHO SECRETARY OF STATE  
 09/12/2006 05:00  
 CK: 10913 CT: 204335 BH: 974720  
 1 @ 100.00 = 100.00 AUTH PRO # 2

0168824



## Department of State

I certify from the records of this office that STAFFLINK OUTSOURCING IV, INC., is a corporation organized under the laws of the State of Florida, filed on June 23, 1999.

The document number of this corporation is P99000056835.

I further certify that said corporation has paid all fees due this office through December 31, 2006, that its most recent annual report/uniform business report was filed on April 27, 2006, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Twenty-second day of August, 2006



CR2EO22 (01-06)

*Sue M. Cobb*  
Sue M. Cobb  
Secretary of State