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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: TalentBridge Internati	onal, Inc.
	prporation - must include suffix)
Dear Sir or Madam:	
	tion for Authorization to Transact Business in Florida," tted to register the above referenced foreign corporation to
Please return all correspondence concerning this	s matter to the following:
Jonathan T. Mann	
7)	Name of Person)
TAC Worldwide	
(F	Firm/Company)
888 Washington Street, Suite 10)2,
	(Address)
Dedham, MA 02026	
(City	y/State and Zip code)
For further information concerning this matter,	please call:
Jonathan T. Mann	781 ₎ 251-8334
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section	MAILING ADDRESS: New Filing Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Statu	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

~ .			
	ilable in Florida, enter alternate corporate name		business in Florida)
Delaware	3.	20-8704101	11.
	under the law of which it is incorporated)	(FEI number, if applic	ane)
March 22, 200	e of incorporation) 5.	(Duration: Year corp. will cease to e	viet or "nametual")
(Dai	. i i	(Dination, Teat corp. win cease to e	Aist of perpetual)
	•	n Florida, if prior to registration) 502, F.S., to determine penalty liability)
297-101 Kinde	rkamack Road, Suite 136, Oradell, NJ 076	•	,
	(Principal office add		
-	(Current mailing add	ress)	
Drofossional S	Staffing Services		
	s) of corporation authorized in home state or co	ountry to be cerried out in state of Flori	da)
	,=, == ================================	,	. 4. 0
	-4 -4dCPl-vidsistemed	Now MOT	
	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	7 OC
	et address of Florida registered agent: (P.C NRAI Services, Inc.	D. Box NOT acceptable)	7 OCT 3
Name and stre		D. Box NOT acceptable)	TOCT ST
Name and stre	NRAI Services, Inc.		ALLAHASSEE, FI
Name and <u>stre</u> Name:	NRAI Services, Inc. 2731 Executive Park Dr., Ste 4		TOCH OF STAT
Name and <u>stre</u> Name: ffice Address:	NRAI Services, Inc. 2731 Executive Park Dr., Ste 4 Weston (City)	, Florida <u>33331</u>	TOCH STATE OF STATE ALLAHASSEE, FLORIDA
Name and <u>stre</u> Name: ffice Address: D. Registered a aving been name	NRAI Services, Inc. 2731 Executive Park Dr., Ste 4 Weston (City) gent's acceptance: ned as registered agent and to accept services	, Florida 33331 (Zip code) ce of process for the above stated c	orporation at the p
Name and stre Name: ffice Address: . Registered a aving been namesignated in this	NRAI Services, Inc. 2731 Executive Park Dr., Ste 4 Weston (City) gent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointn	, Florida 33331 (Zip code) ce of process for the above stated conent as registered agent and agree	orporation at the p to act in this capac
Name and stre Name: ffice Address: D. Registered a aving been names ignated in this arther agree to a strength of the control of the contr	NRAI Services, Inc. 2731 Executive Park Dr., Ste 4 Weston (City) gent's acceptance: ned as registered agent and to accept services	, Florida 33331 (Zip code) ce of process for the above stated content as registered agent and agree elative to the proper and complete j	orporation at the p to act in this capac
Name and streen Name: ffice Address: O. Registered a faving been names ignated in this arther agree to and I am familia.	NRAI Services, Inc. 2731 Executive Park Dr., Ste 4 Weston (City) gent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointmental comply with the provisions of all statutes re-	, Florida 33331 (Zip code) ce of process for the above stated content as registered agent and agree elative to the proper and complete j	orporation at the p to act in this capac
Name and streen Name: Office Address: O. Registered a laving been namesignated in this arther agree to an I am familia.	NRAI Services, Inc. 2731 Executive Park Dr., Ste 4 Weston (City) gent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointment of the provisions of all statutes registered accept the obligations of my positive and accept the obligations of my positive accept accept the obligations of my positive accept a	, Florida 33331 (Zip code) ce of process for the above stated content as registered agent and agree elative to the proper and complete j	orporation at the p to act in this capac

^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Mark Anderson Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 Vice Chairman: Tony Steadman Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 Director: David Rosi Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 Director: Robert Badavas Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 **B. OFFICERS** President: Mark Anderson Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 Vice President: Tony Steadman Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 Tony Steadman Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 David Rosi Address: 297-101 Kinderkamack Road, Suite 136, Oradell NJ 07649 NOTE: ,If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) diego

(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TALENTBRIDGE INTERNATIONAL, INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TALENTBRIDGE INTERNATIONAL, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.







Warriet Smith Windson, Secretary of State

AUTHENTICATION: 6096639

DATE: 10-23-07