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REFERENCE :

393655

COST LIMIT :

ORDER DATE: September 30, 1999

ORDER TIME : 10:17 AM

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ORDER NO. : 393655-005

CUSTOMER NO:

4726231

CUSTOMER: Ms. Teresa Marando

Uniforce Services, Inc.

301 Yamato Road

Suite 4160

Boca Raton, FL

FOREIGN FILINGS

NAME:

COMFORCE OPERATING, INC.

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

__ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Mimi Stephens



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 5, 1999

MIMI STEPHENS CSC NETWORKS TALLAHASSEE, FL

SUBJECT: COMFORCE OPERATING, INC.

Ref. Number: W99000022997

We have received your document for COMFORCE OPERATING, INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

Please note that the FEI Number listed in Item 3 has 10 DIGITS. It should only have NINE.

ALSO, please note that the certificate from Delaware appears to be for COMFORCE TECHNICAL SERVICES, INC. We need a certificate for COMFORCE OPERATING, INC.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 699A00048347



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINĖSS IN FLORIDA** IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Comforce Operating, Inc., (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (State or country under the law of which it is incorporated) perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 415 Crossways Park Drive Woodbury, New York 11797 (Current mailing address) supplemental staffing business (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Corporation Service Company Office Address: 1201 Hays Street

10. Registered agent's acceptance:

Tallahassee

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

Georgianna McGinnis, Asst. Secretary

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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chaixmanx __ John Fanning Harry Maccarrone XXXXXX ALL AT: Michael Madden 415 Crossways Park Drive Woodbury, New York 11797 Daniel Raynor ****** —— Gordon Robinett Address: Address: _ B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: John Fanning Address: same as above Vice President: Robert Ende; Robert Baldwin; Harry Maccarrone Address: ____ same as above Secretary: ___ Harry Maccarrone Address: ____same as above Treasurer: Robert Baldwin Address: <u>same as above</u> NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Robert Ende, Vice President (Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

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Edward J. Freel, Secretary of State

AUTHENTICATION:

2814742 8300

DATE:

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09-30-99