

Filing Fee: \$150.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

2009 MAY 20 AM 10:28
OFFICE OF THE SECRETARY OF STATE
CORPORATIONS DIVISION
148 W. RIVER STREET
PROVIDENCE, RHODE ISLAND 02904-2615

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

Axcess Resources LLC

2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

3. The limited liability company is organized under the laws of New Jersey

4. The date of its organization is April 24, 2009

5. The period of duration of the limited liability company is (if perpetual, so state) perpetual

6. The address of the limited liability company's resident agent in Rhode Island is:

222 Jefferson Boulevard, Suite 200 Warwick, RI 02888

(Street Address, not P.O. Box)

(City/Town)

(Zip Code)

and the name of the resident agent at such address is Corporation Service Company

(Name of Agent)

7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:

126 Armington St, Cranston RI 02905

1375 Plainfield Ave, Watchung NJ 07069

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MAY 20 2009

9. The mailing address for the limited liability company is:

1375 Plainfield Ave, Watchung NJ 07069

By 089859

10:28

10. Management of the Limited Liability Company:

A. The limited liability company is to be managed by its members. *(If you have checked this box, go to item no. 11.)*

or

B. The limited liability company is to be managed by one (1) or more managers. *(If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)*

<u>Manager</u>	<u>Address</u>
Alfred T. Cabral	126 Armington St., Cranston RI 02905
Michael R. Epstein	1375 Plainfield Ave, Watchung NJ 07069
_____	_____
_____	_____
_____	_____

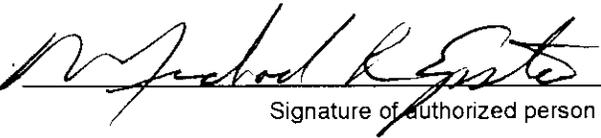
11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: May 18, 2009

Access Resources LLC

Print Exact Name of Limited Liability Company Making Application

By 
Signature of authorized person

**STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING**

**ACCESS RESOURCES LLC
0400283617**

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on April 24, 2009.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify the registered agent and registered office are:

*Corporation Service Company
830 Bear Tavern Rd
West Trenton, NJ 08628*



Certificate Number: 114241825

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
27th day of April, 2009*

*R. David Rousseau
State Treasurer*

NEW JERSEY DEPARTMENT OF TREASURY
DIVISION OF REVENUE

CERTIFICATE OF FORMATION

AXCESS RESOURCES LLC
0400283617

The above-named DOMESTIC LIMITED LIABILITY COMPANY was duly filed in accordance with New Jersey State Law on 04/24/2009 and was assigned identification number 0400283617. Following are the articles that constitute its original certificate.

1. **Name:**
AXCESS RESOURCES LLC
2. **Registered Agent:**
CORPORATION SERVICE COMPANY
3. **Registered Office:**
830 BEAR TAVERN ROAD, SUITE 305
WEST TRENTON, NJ 08628
4. **Business Purpose:**
STAFFING
5. **Duration:**
PERPETUAL
6. **Members/Managers:**
AXCESS STAFFING SERVICES LLC
1375 PLAINFIELD AVE
WATCHUNG, NJ 07069
7. **Main Business Address:**
1375 PLAINFIELD AVE
WATCHUNG, NJ 07069

Signatures:

MICHAEL R. EPSTEIN
AUTHORIZED REPRESENTATIVE

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
27th day of April, 2009*



R. David Rousseau
State Treasurer

Certificate Number: 114241110

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
FILING CERTIFICATION (CERTIFIED COPY)

AXCESS RESOURCES LLC

0400283617

*I, the Treasurer of the State of New Jersey,
do hereby certify, that the above named business
did file and record in this department a
Certificate of Formation on April 24th, 2009
and that the attached is a true copy of this
document as the same is taken from and compared
with the original(s) filed in this office and now
remaining on file and of record.*



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
27th day of April, 2009*

A handwritten signature in black ink, appearing to read 'R. David Rousseau', is written over a horizontal line.

*R. David Rousseau
State Treasurer*

Certificate Number: 114241832

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly
executed in accordance with the provisions of Title 7 of the General Laws
of Rhode Island, as amended, has been filed in this office on this day:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

Secretary of State

