PHDD0019416

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		4



800257237378

02/28/14--01037--004 **70.00

SECRETARY OF STAIL DIVISION OF CORPORATIONS

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Brown's Online Webinar Training , Inc.

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$70.00.

This represents the cost of the Filing Fees and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Cynthia Brown

Brown's Online Webinar Training, Inc.
(Name of Corporation)

MAILING ADDRESS OF CORPORATION

97 Hollow Branch Xing

Ormond Beach, FL 32174

PHONE

(863) 877-9153

Area Code Number Ext.

SECRETARY OF STATE
HVISION OF CORPORATIONS

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Brown's Online Webinar Training, Inc.		
Pursuant of Florida Statutes Sections 48.091 and 607.0501, the following is submitted:		
The above corporation, organized under the laws of the State of Florida with its registered	d office	
as indicated in the Articles of Incorporation		
at 97 Hollow Branch Xing		
Ormond Beach, FL 32128		
has named <u>Cynthia Brown</u>		
located at the aforesaid address, as its registered agent to accept service of process within	this 룩	DIV.S
state.	FEB 28	ECRUTAR ISION OF C
	AM 10: 37	Y OF STATE
Having been named as registered agent and to accept service of process for the above sta	ted	55
corporation at the place designated in this certificate, I hereby accept the appointment as		
registered agent and agree to act in this capacity. I further agree to comply with the prov	isions of	
all statutes relating to the proper and complete performance of my duties, and I am famil	iar with	
and accept the obligations of my position as registered agent.		
February 19, 2014		
(Signature) (Date)		

ARTICLES OF INCORPORATION of

Brown's	s Online Webinar Trainir	ng, Inc.	
	(name of corporation)		
The undersigned acting as the incorporate adopt(s) the following articles of incorporate adopt(s) the following articles are adopt(e Florida Business Corporat	ion Act,
	ICLE I - CORPORATE NAI	ME	
The name of the corporation is:			
Brown	n's Online Webinar Training,	Inc.	
This corporation shall exist perpetually u	ARTICLE II – DURATION inless dissolved according to	Florida law.	
The corporation is organized for the purplaws of the United States and the State of I		ties or business permitted u	nder the
The corporation is authorized to issue	FICLE IV – CAPITAL STOC 100 shares of common stock		er share.
ARTICLE The street address of the initial principal	V - INITIAL PRINCIPAL (office and, if different, the m		14 F
STREET ADDRESS			8
97 Hollow Branch Xing			8
CITY Ormond Beach	FLORIDA	ZIP 32174	28 AM IO: 37
Mailing address, if different			37
STREET ADDRESS Same as above			
		4/12	
CITY		ZIP	
ARTICLE VI – IN	TIAL REGISTERED OFFICE office and the name of the in		office is:
NAME Cynthia Brown			
ADDRESS 07 Hollow Bronch Ving			

FLORIDA

ZIP 32174

Ormond Beach

CITY

ARTICLE VII - INITIAL BOARD OF DIRECTORS

NAME	Cynthia Brown		·		
ADDRESS	97 Hollow Branch Xing				
CITY	Ormond Beach	STATE	FL	ZIP 32174	
NAME					
ADDRESS					
CITY		STATE	FL	ZIP	
NAME					
ADDRESS		·			
CITY		STATE	FL	ZIP	
	and address of the incorporators signing Cynthia Brown	these Articles of In	corporation are	e as follows:	<u> </u>
NAME	Cynthia Brown	these Articles of In	corporation are	e as follows:	- 8
NAME ADDRESS	Cynthia Brown 97 Hollow Branch Xing				E8 28
NAME ADDRESS CITY	Cynthia Brown	s these Articles of In		ZIP 32174	E8 28 AH
NAME ADDRESS CITY NAME	Cynthia Brown 97 Hollow Branch Xing				E8 28
NAME ADDRESS CITY	Cynthia Brown 97 Hollow Branch Xing		FL		EB 28 AH 10: 3
NAME ADDRESS CITY NAME ADDRESS	Cynthia Brown 97 Hollow Branch Xing	STATE	FL	ZIP 32174	EB 28 AH 10: 3
NAME ADDRESS CITY NAME ADDRESS CITY	Cynthia Brown 97 Hollow Branch Xing	STATE	FL	ZIP 32174	EB 28 AH 10: 3
NAME ADDRESS CITY NAME ADDRESS CITY NAME	Cynthia Brown 97 Hollow Branch Xing	STATE	FL	ZIP 32174	EB 28 AH 10: 3
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	Cynthia Brown 97 Hollow Branch Xing	STATE STATE	FL FL	ZIP 32174 ZIP	EB 28 AH 10: 3
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The undersi	Cynthia Brown 97 Hollow Branch Xing Ormond Beach gned incorporator(s) have executed thes	STATE STATE	FL FL	ZIP 32174 ZIP	EB 28 AH 10: 3
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The undersi	Cynthia Brown 97 Hollow Branch Xing Ormond Beach	STATE STATE	FL FL	ZIP 32174 ZIP ZIP	E8 28 AH 10: 38
NAME ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY The undersi	Cynthia Brown 97 Hollow Branch Xing Ormond Beach gned incorporator(s) have executed thes	STATE STATE	FL FL	ZIP 32174 ZIP	E8 28 AH 10: 38