

P24000046350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

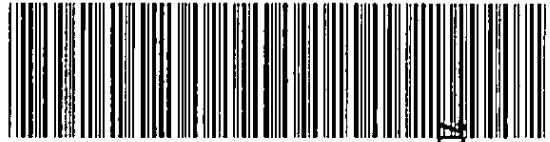
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE OF FLORIDA
TALLAHASSEE, FL

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: AMERICAN SAFETY INSTITUTE INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

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FROM: BART W. CASSIDY
Name (Printed or typed)

9009 MAHAN DRIVE, SUITE 501
Address

TALLAHASSEE, FL 32309
City, State & Zip

1-850-681-7233
Daytime Telephone number

CATHERINE@AMERICANSAFETYINSTITUTE.COM
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: AMERICAN SAFETY INSTITUTE, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
9009 MAHAN DRIVE, SUITE 501
TALLAHASSEE, FL 32309

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE GENERAL PURPOSE FOR WHICH THIS CORPORATION IS INITIALLY ORGANIZED ARE TO ENGAGE IN ANY AND ALL LAWFUL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER FLORIDA LAW.

ARTICLE IV SHARES

The number of shares of stock is: 1000 common voting starting at \$1.00 per share

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BART W. CASSIDY PRESIDENT
Address: 9009 MAHAN DRIVE, SUITE 501
TALLAHASSEE, FL 32309

Name and Title: CATHERINE CASSIDY VP
Address: 9009 MAHAN DRIVE, SUITE 501
TALLAHASSEE, FL 32309

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: BART W. CASSIDY
 Address: 9009 MAHAN DRIVE, SUITE 501
TALLAHASSEE, FL 32309

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: BART W. CASSIDY
 Address: 9009 MAHAN DRIVE, SUITE 501
TALLAHASSEE, FL 32309

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 DEPARTMENT OF STATE

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JULY 11, 2024 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Bart W Cassidy _____ 7/12/2024
 Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Bart W Cassidy _____ 7/12/2024
 Required Signature/Incorporator Date

July 12, 2024

This affidavit is to affirm and confirm that American Safety Institute Inc, a Florida Not for Profit Corporation, Document Number N95000002807 releases the corporate name, American Safety Institute Inc effective July 12, 2024.

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NOTARY PUBLIC STATE
TALLAHASSEE, FL

Signature Bart W Cassidy
Bart W. Cassidy
President/Director

Date 7-12-24.

Notary Connie M Shipley

Notary Stamp/Date

