TO: Qualification/Tax Lien Section **Division of Corporations**

SUBJECT: Pryor Training Services, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

*****70.00 ******70.00

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

	Mike Biritz (Name of Person)	_		, and
	Pryor Training Resources, Inc. (Firm/Company)	- <u>P</u>	00	•
•	9757 Metcalf Avenue		SEP	<u></u>
	(Address)		J.	
	Overland Park, KS 66212			Щ
	(City/State/Zip)	Ξ.	<u> </u>	
Should you n	eed to call someone concerning this matter, please call:	Security (Security Security Se	: 32	

Mike Biritz

(Name of Person)

<u>at (913)967-8520</u>

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

9W1110 1.000

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.

1	Pryor Training Services, Inc.										
••	(Name of corporation: must include the word "INCORPORAT words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	early	inc	dicate th	Y", "C at it i	CORPORAT s a corpora	TION" or ation instea	d of a		• -	, T under
2.	Kansas	3.	. 4	8-123	402	4					
	(State or country under the law of which it is incorporated)					(FEI num	ber, if app	licable)	•		
4.	,, 20, 00			tual	-						i. —
	(Date of incorporation)	(Dur	rati	on: Yea	r corp	o. will ceas	e to exist d	r "perpe	tual")		
6.	10/01/00					<u>-</u>			,		
	(Date first transacted business in Florida.) (SEE SEC	CTIO	NS	607.15	01, 60	7.1502 and	1 817.155,	F.S.)			
7.	9757 Metcalf Avenue										幸。 宝
	Overland Park, KS 66212										
	(Current	maili	ing	address)						_
					,						
8.	Conduct training seminars and sell trai						t-t- of			,	<u> </u>
	(Purpose(s) of corporation authorized in home state	or co	oun	itry to b	e carr	iea out in tr	ne state of	Fionda)	8		
_	Name and street address of Florida registered ager	nt. /[D () Boy	r Ma	il Drop Bo	NOT a	centab	le) 원		
9.	Name and street address of Florida registered agei	ii c. (r	Γ.). BOX (N IATO	iii Diop De	× 1101 ac	(California)	· .		
	Name:CT Corporation System			 .			att to			TH.	
С	office Address: 1200 S. Pine Island Road								-		
Ī								سب 22	"		3-40° (27 7)
	Plantation			<u></u>		, Florida,	33324 (Zip Cod	<u>حت ا</u>	: <u>~~</u>	#*	. =-
							(Zip Cou	0)			
10). Registered agent's acceptance:										
th. wi	aving been named as registered agent and to accept service is application, I hereby accept the appointment as registered the the provisions of all statutes relative to the proper and continuous of my position as registered agent.	d ace	ent.	and agn	e to i	act in this c	anacity i t	urtner ac	rree to e	compiv	
see attached sheet											
(Registered agent's signature)											

12. Names and addresses of officers and/or directors: (Street address ONLY - - P.O. Box NOT acceptable)

which it is incorporated.

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

ACCEPTANCE OF APPOINTMENT

RE: Pryor Training Services, Inc.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: July 31, 2000

C T CORPORATION SYSTEM

By

Sean Emerick, Asst. Secretary

OO SEP -5 PM 1: 32
PALCAHASSEE PI GAM.

Chairman: See attached sheet	
Address:	
	7. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12
Address:	
Director:	
3. OFFICERS (Street address only	
	SEP TO THE
	32
ddress:	
ecretary:	
easurer:	
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OTE: If necessary, you may attach an add	dendum to the application listing additional officers and/or directors.
OTE: If necessary, you may attach an add	

PRYOR TRAINING SERVICES, INC. FEIN 48-1234024

Officers:

Tom Sanford, President	493-80-0665	9757 Metcalf Ave., Overland Park, KS 66212
Phillip R. Love, Secretary	357-50-1695	9757 Metcalf Ave., Overland Park, KS 66212
Michael B. Hays, Treasurer	575-60-4414	9757 Metcalf Ave., Overland Park, KS 66212

Board of Directors:

George Merritt Jenkins

Phillip R. Love

Christopher M. Temple

DO SEP -5 PM 1: 32

STATE OF KANSAS

OFFICE OF SECRETARY OF STATE RON THORNBURGH



To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the State of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to corporations, and that I am the proper official to execute this certificate.

I FURTHER CERTIFY that

PRYOR TRAINING SERVICES, INC.

is a regularly and properly organized corporation under the laws of the state of Kansas, having been incorporated in Kansas on the 25th day of July, A.D. 2000 has paid all fees and franchise taxes due this office and is in good standing according to the records now on file in the office of Secretary of State.



In testimony whereof: I hereto set my hand and cause to be affixed my official seal. Done at the City of Topeka, this 10th day of August, A.D. 2000.

> RON THORNBURGH SECRETARY OF STATE