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(Requestor's Name)			
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SECRETARY OF STATE

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COVER LETTER

TO:	New Filing So Division of C			
SUBJI	ECT:	Summit Training Source	ce, Inc.	
00.502		(Name of corp	oration - must include suff	ix)
Dear Si	ir or Madam:			
"Certifi				nsact Business in Florida," erenced foreign corporation to
Please	return all corre	spondence concerning this n	natter to the following:	
D	avid Myers	, Controller		
		(Nai	me of Person)	
S	unmit Train	ning Source, Inc.		
		(Fire	m/Company)	
4	170 Embassy	/ Drive SE		
		•	(Address)	
G	rand Rapids	s, MI 49546		
		(City/S	State and Zip code)	
For furt	ther informatio	on concerning this matter, ple	ease call:	
Dar	vid Myers	at (6]	L6) 949-6560	
	(Name of Per	rson) (A	Area Code & Daytime Tel	ephone Number)
	New Filing Solvision of C Clifton Build	orporations ing ve Center Circle	New Filing Division o P.O. Box 6	f Corporations
Enclose	ed is a check fo	or the following amount:		
\$70.0	00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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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.	Summit Training Source, Inc.				
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
2.	Michigan 38-2511830				
	(State or country under the law of which it is incorporated) (FEI number, if applicable)				
4.	2-10-84 perpetual				
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")				
6.	OT F				
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)				
7.	4170 Embassy Drive SE Grand Rapids, MI 49546				
	(Principal office address)				
	4170 Embassy Drive SE Grand Rapids, MI 49546				
	(Current mailing address)				
8.	Environmental Health and Safety Training				
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)				
9.	9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)				
	Name: Valerie R. Overheul				
О	ffice Address: 22556 Baycrest Ridge				
	Bonita Springs , Florida 34135				
	(City) (Zip code)				

10. Registered agent's acceptance:

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.

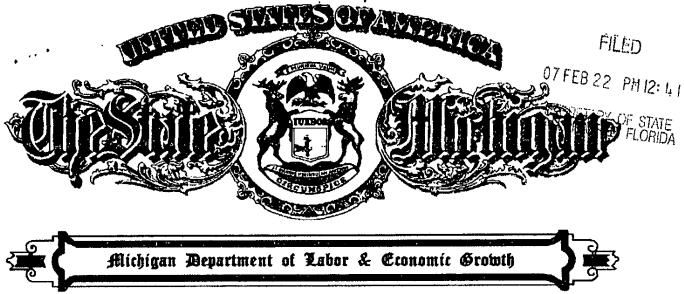
Melicie Olecchen (Registered agent's signature)

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.

12	Names	and business	addresses	of officers	and/or	directors:
14.	1 annos	and pasiness	auditosses	OI OILICOIS	o and Oi	uncciois.

FILED

A. DIREC	07.550	
Chairman: _	Valerie R. Overheul	07 FEB 22 PH 12: 41
	4170 Embassy Drive SE	SECRETARY OF STATE TALLAHASSET, FLORIDA
	Grand Rapids, MI 49546	CONUA
Vice Chairm	an:	
Address:		
_		
Director:		
Address:		
	Valerië R. Overheul 4170 Embassy Drive SE	
Address:		
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	nt:	
Address:		
Secretary: _		
Address:		
Treasurer: _		
Address:		
NOTE: If:	necessary, you may attach an addendum to the application I	isting additional officers and/or directors.
	(Signature of Director or Officer listed in number	er 12 of the application)
14	Valerie R. Overheul President (Typed or printed name and capacity of person	e signing application)
	(1) ped of printed name and capacity of person	r premie abbiteation)



Lansing, Michigan

This is to Certify That

SUMMIT TRAINING SOURCE, INC.

a Michigan profit corporation was validly incorporated on February 10, 1984, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 909573

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 15th day of February, 2007.

Bureau of Commercial Services