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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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APR 16 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

iTrainer, Inc.

**SUBJECT:**

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

James P. Curry

Name of Person

Curry, P.L.

Firm/Company

601 Heritage Drive, Suite 205

Address

Jupiter, FL 33458-2777

City/State and Zip code

james.curry@currypl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James P. Curry

561

972-8222

at ( )

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

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

**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. iTrainer, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Delaware 3. 82-4994603  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 29, 2018 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 601 Heritage Drive, Suite 205, Jupiter, FL 33458-2777  
(Principal office address)
- \_\_\_\_\_ (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: James P. Curry
- Office Address: 601 Heritage Drive, Suite 205
- Jupiter, Florida 33458-2777  
(City) (Zip code)

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STATE OF FLORIDA  
DEPARTMENT OF STATE

**9. 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.*

  
\_\_\_\_\_  
(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: James P. Curry

Address: 601 Heritage Drive, Suite 205, Jupiter, FL 33458-2777

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

**B. OFFICERS**

President: James P. Curry

Address: 601 Heritage Drive, Suite 205, Jupiter, FL 33458-2777

Vice President:

Address:

Secretary: James P. Curry

Address: 601 Heritage Drive, Suite 205, Jupiter, FL 33458-2777

Treasurer: James P. Curry

Address: 601 Heritage Drive, Suite 205, Jupiter, FL 33458-2777

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. James P. Curry Chairman

(Typed or printed name and capacity of person signing application)

18 APR 12 PM 4:49  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ITRAINER, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ITRAINER, INC." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

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ALLAHASSEE, FLORIDA



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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202486947

Date: 04-10-18