Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007 Phone

: (702)866-2500

Fax Number

: (702)866-2689

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FOREIGN PROFIT/NONPROFIT CORPORATION

Training, Rehabilitation, & Development Institute, INC:

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:	O: Registration Section Division of Corporations					
eum i	Ecr. Training, I	Rehabilitation, & Developm	ent Institute,	Inc.		
2013	ISC (;	Name of Corporati	on — must inc	clude suffix		
Dear S	ir or Madam:					
Affnir	in Florida", "Ce	ion by Foreign Not for Profi rtificate of Existence", or "C enced not for profit corporat	Certificate of	Status" and ch	ieck are submitt	t its ed to
Please	return all corresp	oundence concerning this ma	atter to the fo	llowing:		
		Courtney	Thomas			
		Name o	Person			
		InCorp Se	rvices, inc.			
	,	Firm/C	Company		, ,	
		3773 Howard Hugh	es Pkwy. S	uite 500s		
		Ad	dress	-		
		Las Vegas, N	IV 89169-80)14		
		City/State a	ınd Zip Code			
		documents	@incorp.co	m		
	E-n	nail address: (to be used for	luture annua	report notifica	ntion)	
For fu	ther information	concerning this matter, plos	ise call:			
Jouriney Th	omas on behalf	of InCarp Services, Inc.	` \	(800) 246-2677		
	Name	of Person and	Aren Code	Daytime Tel	lephone Numbe	r
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Talinhussee, FL 32314		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclos	ed is a check for	the following amount:				
s 70	0.00 Filing Fee	□\$78.75 Filing Fee & Certificate of Status		"Hing Fee & ed Copy	☐ \$87.50 F Certifica Certified	te of Status &

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617, 1503, FLURIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Training, Re	habilitation, & Deve	lopment Institute, Inc.			
(Name of corpo import la langui in the name at p	ration: must include it ige as will clearly indi- resent. "Company" or	ne word "INCORPORAT cate that it is a corporatio "Co." may not be used as	ED" or "CORPORATION" or words or abl it bistead of a natural person or partnership i a corporate sulfix by a nonprofit corporati	previations of if not so can on.)	flika Isinca
(11'name unavi	nilable in Florida, ente	r alterunte corporate nome	e adopted for the purpose of transacting bus	iness in Flor	ida)
Towas		_	74-2938051		
2. Texas	atry under the law of v	which it is incorporated)	74-2938051 (FEI number, if applicable		
		5	Perpetual		
*·	Date of Incorporation)		(Date of duration, if other than	perpetual)	
. Upon Filing	1				
(Date first cond	ucted affairs in Florida	if prior to registration. See	sections 617.1501 & 617.1502, F.S. to deter	mine penalty	Tiability.)
7. 42S Soledad.	Suite 800	San Antonio T	X 78205		
/·		(Principal	office address)	*	
					<u></u>
		(Current mailing	address, if different)	<u>, , , , , , , , , , , , , , , , , , , </u>	
				<i>6</i> -	
g. Janitorial Ser	vices				
(Purpose(s) of	estroitus authorized	In home state or country	to be carried out in the state of Florida)		
0. Name and str	eet address of Floric	da rovistered agent: (P.)	O, Box <u>NOT</u> acceptable)		77
7, 140011c 11110 <u>001</u>	<u> </u>				6-
Name:	InCorp Services, In	ç.			
	17888 67th Court			_	
CTITICE THEIR CHAIN	Loxahatchee		, Florida <u>33470</u>		
		(City)	(Zip Code)		
Having been no designated in th fordier agree to	ds application, I lie	igent and to accept syr reby accept the applica- rovisions of all sections	vice of process for the above stated continent as registered agent and agree to relative to the proper and complete p of my position as registered agent.	o açı in tuis	сарасиу, т
			Courtney Thomas on behalf of I	nCorp Servi	ces, Inc.
	΄ ΄		agent's signature)		
the Departn	nent of State, by the	bace duly authenticate Secretary of State or c high it is incorporated.	id, not more than 90 days prior to deliv other official having custody of corpora	ery of this a to records in	pplication to n the

12 (Names and addresses of officers and/or directors
A. DIRECTORS
John Rangel
Address: 547 Whit Cyn
San Antonio TX 78260
Vice Chairman:
425 Soledad, Suite 800
San Antonio, TX 78205
Alex Sheel Director:
425 Soledad, Suite 800 Address:
San Antonio TX 78205
Walter Ritchie
425 Soledad, Sulte 800 Address:
San Antonio TX 78205
B. OFFICERS
President: John Rangel
547 Whit Cyn
San Antonio TX 78260
Deyanira Serna Vice President:
425 Soledad, Sulte 800
San Antonio, TX 78205
Robert Hernandez Secretary:
425 Soledad, Sulte 800 San Antonio TX 78205
Robert Hernandez Treusurer:
425 Soledad, Suite 800 San Antonio TX 78205
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. Signature of Chairman, ice Chairman, or any officer listed in number 12 of the application)
14. Robert Herzandez, Secretary (Typed or printed name and capacity of person signing application)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Rolando B. Pablos Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for TRAINING, REHABILITATION, & DEVELOPMENT INSTITUTE, INC. (file number 155665901), a Domestic Nonprofit Corporation, was filed in this office on November 04, 1000

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 10, 2018.



(Z)

Rolando B. Pablos Secretary of State

(512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 823758660002