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January 31, 2020

DONNA GARNVIK 4515 FALCON RIDGE DR. SARASOTA, FL 34233 US

SUBJECT: TRAINING FOR EXCELLENCE

Ref. Number: W20000010245

We have received your document for TRAINING FOR EXCELLENCE and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 020A00002336



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Indigo Enterprises			
SOBJECT:	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by For "Certificate of Existence," or "Ce above referenced foreign corporate	rtificate of Good Stan	Authorization to Transact Business ding" and check are submitted to ress in Florida.	in Florida," egister the
Please return all correspondence of	concerning this matter	to the following:	
Donna Garnvik		•	
	Name of	Person	
Indigo Enterprises			
	Firm/Com	pany	
4515 Falcon Ridge Dr.			
	Addre	* 88	·
Sarasota, FL 34233			
	City/State ar	nd Zip code	2020 F; 1 24
donna(a) wetrain.biz			نبت
E-mail	address: (to be used for	or future annual report notification)	22
For further information concerning	g this matter, please ca	all:	8:
Donna Garnvik	at (6 600-4138	
Name of Person	Area Code	: Daytime Telephone Number	er ~
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, St Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	IDA DEPARTMENT	\$78.75 Filing Fee & S87.50 Certified Copy Certif	0 Filing Fee, ficate of Status &

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. Indigo Enterpri	ses			
(Enter name of c	corporation: must include "INCORPORATEI lorp," "Inc." "Co." or "Corp.")	D."	"COMPANY," "CORPORATION,"	
Training for Ex	cellence Inc.			
(If name unavail	able in Florida, enter alternate corporate nam	ie ac	lopted for the purpose of transacting business	in Florida)
2. Nevada	_	3.	314182436	
(State or counti	······································		(FEI number, if applicable)	
4. October 19, 201	16	5. I	Perpetual	
(Date	(Date of incorporation)		(Date of duration, if other than perpe	tual)
6. NA				
4515 Euloon Disk	(SEE SECTIONS 607.1501 & 607.	s in I .150	Horida, if prior to registration) 2, F.S., to determine penalty liability)	
7. 4515 Paleon Ridg	ge Dr. Sarasota, Fl. 34233		02 11	
same	(Princ	стра	office address)	7010 F
(Current mailing address, if different)				
8. Name and street	et <u>address</u> of Florida registered agent: (P	'.O.	Box NOT acceptable)	
Name:	Donna Garnvik		_	07
Office Address:	4515 Falcon Ridge Dr.		_	
	Sarasota		Florida ³⁴²³³	
	(City)		(Zip code)	

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. DIRI	ECTORS	
Chairman.	:	<u></u>
Address:		
Vice Chai	rman:	
Address:		,
-		
Director:	DONNA GARNVIA	
Address:	3373 Wynn Rd Sie C-1	
	Las Vegas, NV 89102	
Director:		
Address:		
		707/11
B. OFF	ICERS	<u> </u>
President:	DONNA GARNVIK	24
Address:	3373 Wynn Rd Ste C-1	
	Las Vegas, NV 89102	
Vice Presi	dent:	
Address:		
Secretary:	DONNA GARNVIA	
Address:	3373 Wyrn Rd Ste C-1 Las Vegas, NV 89102	
Treasurer:	DONNA GARNVIK	
Address:	3373 Wynn Rd Ste C-1, Las Vegas INV 89102	
NOTE: 12	If necessary, you may attach an addengtion to the application listing additional officers and/or	directors.
are true a	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the find that he or she is aware that false information submitted in a document to the Department of gree felony as provided for in s.817.155, F.S.	acts stated herein of State constitutes
	na Garnvik, President	

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I. Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate. The evidence, **INDIGO ENTERPRISES**, as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 10/19/2016, and is in good standing in this state.



Certificate Number: B20200106491044

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 01/06/2020.

Barbara K. Cegavske

BARBARA K. CEGAVSKE

Secretary of State