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To: Qualifica	ation/Tax Lien S	Section	** *		_	
	of Corporations					
SUBJECT:	NATIONAL SAF	E SCHOOL INST	ITUTE, INC.			
5020201. <u></u>		(Name of corpo	ration - must include s	suffix)		
Dear Sir or Mada	am:					
			C A (1 - ' 4- 5	Turn as of Darsings in	Elorido"	
The enclosed "A	pplication by Fo	breign Corporation heck are submitted	n for Authorization to a d to register the above	referenced foreign c	orporation	
to transact busin	ess in Florida.	HOOK are successful.	2 10 108,0103 0110 010 11			
	,					
Please return all	correspondence	concerning unis ir	natter to the following:			. <u> </u>
	· .	MARTIN F. S				
		(Nan	ne of Person)			· · ·
	KILLGORE,	PEARLMAN, ST	AMP, ORNSTEIN & S	SQUIRES	: T-+	
			n/Company)			
		940 HIGHLAND	AVENUE			,
			Address)		• •••	2.165
		ORLANDO, FLOR	•			4.*
			y/State/Zip)		:	-
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				400002 -08/13	79901063-	⊦——:> -NN9
Should you need	d to call someon	e concerning this	matter, please call:	李承承未来	78.75 ****	k78.75
						•
Carol_Bor		at (<u>4</u> 0				
(Name	of Person)	()	Area Code & Daytime	Telephone Number)	SEC IVISI	· <u>·</u> · ·
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					3 TA	
STREET ADD	RESS:		MAILING AD	DDRESS:	PA CO	
Oualification/Ta	ax Lien Section		Qualification/T	ax Lien Section		· · · · · · · · · · · · · · · · · · ·
Division of Cor			Division of Cor		RATION 2: 45	d.
409 E. Gaines S	St.		P.O. Box 6327		1 0, ₹	
Tallahassee, FL	, 32399	· - 66m.	Tallahassee, FI	L 32314		
Enclosed is a ch	neck for the follo	owing amount:			-	-
☐ \$70.00 Filing		3.75 Filing Fee &	\$78.75 Filing F Certified Copy		Filing Fee, cate of Status &	; _ ;

Certified Copy

KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS ATTORNEYS AND COUNSELORS AT LAW

JESSICA J. HALPERIN FRANK H. KILLGORE, JR. KRISTINE R. KUTZ MARK L. ORNSTEIN

940 HIGHLAND AVENUE ORLANDO, FLORIDA 32803 CRAIG S. PEARLMAN 1 T. GREY SQUIRES 2 MARTIN F. STAMP 3

POST OFFICE BOX 1913 ORLANDO, FLORIDA 32802-1913 TELEPHONE: (407) 425-1020 FAX: (407) 839-3635

August 12, 1999

1 ALSO MEMBER OF DC & WEST VIRGINIA BAR 2 CERTIFIED CIRCUIT COURT MEDIATOR 3 ALSO MEMBER OF NEW YORK & TEXAS BAR

Qualification /Tax Lien Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

National Safe School Institute, Inc.

Dear Sir or Madam:

Enclosed please find the appropriate forms and check for the Application by Foreign Corporation for Authorization to Transact Business in Florida.

I have enclosed a pre-addressed Federal Express Airbill for you to use to return the Certified Copy to us.

If you have any questions, please give me a call.

Sincerely,

Carol L. Borglum

Secretary to Martin F. Stamp

\cb Enclosures

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED T REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. NATIONAL SAFE SCHOOL INSTITUTE, INC. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) DELAWARE (FEI number, if applicable) (State or country under the law of which it is incorporated) August 3, 1999 (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) August 3, 1999 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 940 Highland Avenue, Orlando, Florida 32803 (Current mailing address) School Safety Consultants (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Mark L. Ornstein Name: 940 Highland Avenue Office Address: Orlando Florida,

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.

(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.

	Steve Burhoe	
ddress:	2561 Grassy Point Drive, Apt. 201	
	Lake Mary, Florida 32746	- Haliban
ce Chairr	nan:	**************************************
idress:		
rector: _	Mark L.Ornstein	-
ldress:	940 Highland Avenue	
_	Orlando, Florida 32803	
rector: _	Wolfgang Halbig	
dress: _	2561 Grassy Point Drive, Apt. 201	
	Lake Mary, Florida 32746	
OFFIC	ERS (Street address only - P.O. Box NOT acceptable)	
sident:	Wolfgang Halbig	
	2561 Grassy Point Drive, Apt. 201	- <u> </u>
	Lake Mary, Florida 32746	
e Preside	nt: Ron Davis	
ress:	. 2561 Grassy Point Drive, Apt. 201	N SEC
	Lake Mary, Florida 32746	등 ^유 류
retary: _	Natalie Stavrakis	3 67 E
ress:	101 Philippe Parkway, Suite 300	51A 2: AA
•	Safety Harbor, Florida 34647	55 ONS
surer: _	Richard Wells	
ress:	2561 Grassy Point Drive, Apt. 201	
	Lake Mary, Florida 32746	
TE: Ifn	ecessary, you may attack an addendum to the application listing additional officers and/or directors.	·
, _, _,	y y 3943, you may attack an addendum to the application listing additional officers and/or directors.	

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL SAFE SCHOOL INSTITUTE, 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 ELEVENTH DAY OF AUGUST, A.D. 1999

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL SAFE AUGUST, A.D. 1999

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCH

AUTHENTICATION:

08-11-99

991334072

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