



EMERGENCY MEDICAL TRAINING INSTITUTE

7430 S.W. 153rd Place, #107, Miami, Florida 33193
(305) 380-1411 or Fax (305) 408-7010

N00000000818

January 20, 2000

Division of Incorporation
PO Box 6327
Tallahassee, Florida 32314

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*****78.75 *****78.75


To Whom It May Concern:

Enclosed please find check #1671 in the amount of \$78.75 to cover the cost of incorporating and receiving a Certificate of Incorporation.

We are a school of EMS and Allied Health Medical Education located in Miami, Florida and have applied for County and State Licensure. Please register Emergency Medical Training Institute as a Non-For-Profit Corporation, so that we may meet these requirements.

Thank you for your assistance. I look forward to receiving the Certificate of Incorporation.

Very truly yours,


Bruce L. Gadol, REMT, I/C
Director

/rg
Enclosures

Bruce Gadol GAVE
AUTHORIZATION BY PHONE TO
CORRECT ART. IV
DATE 2/8
DOC. EXAM 1/R

FILED
00 FEB - 7 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W00-2664

K. Rolfe FEB 08 2000

THE TRAINING CENTER FOR CPR, FIRST AID AND ALLIED HEALTH EDUCATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 31, 2000

BRUCE L GADOI
EMERGENCY MEDICAL TRAINING INSTITUTE
7430 SW 153RD PLACE, #107
MIAMI, FL 33193

SUBJECT: EMERGENCY MEDICAL TRAINING INSTITUTE
Ref. Number: W00000002664

We have received your document for EMERGENCY MEDICAL TRAINING INSTITUTE 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 articles of incorporation of a nonprofit corporation must be prepared in compliance with section 617.0202, Florida Statutes. Please refer to that section of the law for assistance.

We are enclosing the proper form(s) with instructions for your convenience.

Bylaws are not filed with this office. Please retain them for your records.

Please return the original and one copy of 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) 487-6924.

Kimberly Rolfe
Corporate Specialist Supervisor

Letter Number: 000A00004487

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

EMERGENCY MEDICAL TRAINING INSTITUTE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7430 SW 153 PLACE *107 MIAMI, FLORIDA 33193

PHYSICAL ADDRESS: 13205 SW 137TH AVE SUITE #221 MIA, FL 33184
(UNDER CONSTRUCTION)

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

TRAINING CENTER FOR CPR, FIRST AID & ALLIED HEALTH
EDUCATION

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

APPOINTED BY the Founder.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

BRUCE L. GADOL

7430 SW 153 PL. *107 MIAMI, FL 33193.

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

BRUCE L. GADOL


7430 SW 153 PL * 107 MIAMI, FL 33193.


Signature/Incorporator


Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/Registered Agent


Date