NI5000	0107402
(Requestor's Name) (Address) (Address)	300277702773
(City/State/Zip/Phone #)	10/05/1501026004 **87.50
(Document Number)	
Office Use Only	
VALI5-67274	MD 1115

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Next Steps Training, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

STO.00 Filing Fee

Status

□\$78.75 Filing Fee & Certified Copy Service States S

ADDITIONAL COPY REQUIRED

Tina R. Albritton FROM:

Name (Printed or typed)

7575 West Highway 326

Address

Ocala, Fi_ 34482

City, State & Zip

352-207-9017

Daytime Telephone number

trinitymtg@aol.com,

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

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2015

TINA R. ALBRITTON 7575 WEST HIGHWAY 326 OCALA, FL 34482

SUBJECT: NEXT STEPS TRAINING, INC. Ref. Number: W15000067274

We have received your document for NEXT STEPS TRAINING, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) I - The name of the Corporation..

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

You must list at least one incorporator with a complete business street address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year. Please return the corrected 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) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 915A00021487

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Next Steps Training Collaborative, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00 Filing Fee ST8.75 Filing Fee & Certificate of Status

	· ·	
\$78.75	\$87.50	
Filing Fee	Filing Fcc,	
& Certified Copy	Certified Cor	yу
	& Certificate	Ī

ADDITIONAL COPY REQUIRED

FROM: _____

Name (Printed or typed)

7575 West Highway 326

Address

Ocala, FL 34482

City, State & Zip

352-207-9017

Daytime Telephone number

trinitymtg@aol.com,

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

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

·)·

In compliance with Chapter 617, F.S., (Not for Profit)

<u>TICLE II PRINCIPAL OFFICE</u>	
Principal <u>street</u> address: 7575 West Highway #326	Mailing address, if different is:
Ocala, Fl. 34482	
TICLE IIIPURPOSE	
purpose for which the corporation is organized is:	· · · · · · · · · · · · · · · · · · ·
e purpose for which the corporation is organized is:	

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title	Tina Albritton, President	Name and Title	Marie Hansel, Treas	urer
Address	7575 West Highway #326	Address:	5543 Northwest 56th	1
	Ocala, Fl. 34482	-	Ocala, FL 34482	,
		-	· · ·	· · · · · · · · · · · · · · · · · · ·
Name and Title	Brenda Dawson, Secretary	Name and Title		
Address	5399 Northwest 56th Terrace	Address:	·	
	Ocala, FL 34482			
		_	· · · ·	
Name and Title	······	Name and Title	·	
Address		Address:		
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Name and Title:	Name	e and Title:		<u> </u>
Address	Addr	ess:	· .	·
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Name and Title:	Nam	e and Title:		
Address	Addr	ess:		<u> </u>
	······			
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ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT acceptable)	of the registered agen	t is:	
Name:	Tina R. Albritton			
Address:	7575 West Highway, #326			
	Ocala, FL 34482		•	
	INCORPORATOR			
The <u>name and add</u>	dress of the Incorporator is:			
Name:	Tina R. Albritton	·	· · · ·	
Address:	7575 West Highway, #326	· .		
	Ocala, FL 34482			
ARTICLE VIII	EFFECTIVE DATE:	,		
Effective date, if o	other than the date of filing: $\frac{112/15}{15}$ ate is listed, the date must be specific and can		IONAL)	
after the filing.)	ite is insted, the date must be specific and can	not de more than iiv		ir or 90 Dusiness days
Note: If the date i	inserted in this block does not meet the applicab	le statutory filing requ	lirements, this date v	vill not be listed as the
document's effecti	ive date on the Department of State's records.			
Having here you	ned as registered agent to accept service of pro	MARE FOR the above sta	ted competition at t	he share designated in t
	nea as registered agent to accept service of pro uniliar with and accept the appointment as regis			
Ting	E allinthe		ji la	1/15
- unit	Required Signature of Registered Agent	ľ	<u>"/</u> -	Date
	ment and affirm that the facts stated herein are			»n submitted in a docum
to the Department	t of State constitutes a third degree felony as pro	vulea jor in s.817.155;		
	T IIII. NUM			$\gamma / \gamma / \gamma$

Required Signature of Incorporator

1 Date