TRANSMITTAL LETTER

99 JAN -7 AMII: 20

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

THE NATIONAL SAFETY INFORMATION EXCURNICE, 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

11/01-158

\$78.75

Filing Fee

& Certificate

4578.75

Filing Fee

& Certified Copy

□\$87,50

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: _ ELIZABETH M.T. SKELLY

Name (Printed or typed)

Address

<u>01. 346 73 - 1256</u> City, State & Zip

Daytime Telephone number

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

The National Safety Information Exchange, Inc. ____submit the following articles of incorporation, as a not for profit corporation, pursuant to Chapter 617.0202, F.S.

The undersigned Incorporator, for the purposes of performing a corporation under the Florida Not For Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I: The name of the incorporated business is: The *National Safety Information Exchange*, *Inc.*

ARTICLE II: Principle place of business and mailing address of the corporation: Primary functions and management operations of the corporation will be performed at: 7031 Tanglewood Drive, New Port Richey, FL 34654. Many functions of the corporation will be held at varied locations throughout the state and country.

The mailing address of the corporation will be:

The National Safety Information Exchange, Inc. P.O. Box 1256
Port Richey, FL 34673-1256

1 (727) 844-5999

Internet access: http://www.nsie.org

ARTICLE III: The principle purpose or purposes for which the corporation is organized is provide open access via telephone, postal requests and over the internet for emergency, environmental and occupational safety and health reference and resource information. We are additionally seeking to provide safety training to school age children prior to graduation to provide them with knowledge of their rights for working in a safe workplace.

ARTICLE IV: The directors for the National Safety Information Exchange, Inc. will be sought through established organization by-laws.

ARTICLE V: The street address of the Initial Registered Agent is 7031 Tanglewood Drive, New Port Richey, FL 34654.

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.

I Elizabeth M.T. Skelly accept the designation as the registered agent for the corporation and hereby affix my signature:

Date: /-//- 99

Article VI: The Incorporator for The National Safety Information Exchange, Inc. is Elizabeth M.T. Skelly of 7031 Tanglewood Drive, New Port Richey, FL 34654.

Signature/Incorporator

 $\int -\frac{1}{-99}$ Date