

TRANSMITTAL LETTER

900000085775

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

SUBJECT: TRAINCON, 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
☒ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: JOSE M. MORALES
Name (Printed or typed)

300003360669-1
-08/17/00-01056-001
*****78.75 *****78.75

1747 TINKER DR.
Address

LUTZ, FL 33549
City, State & Zip

(813) 949-7012
Daytime Telephone number

FILED
00 SEP 11 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SEP 11 2000



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 23, 2000

JOSE M. MORALES
1747 TINKER DR.
LUTZ, FL 33549

SUBJECT: TRIANCON, INC.
Ref. Number: W00000020718

We have received your document for TRIANCON, INC. 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 document must state the number of shares of authorized stock.

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) 487-6928.

Tim Burch
Document Specialist

Letter Number: 000A00045169

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

TRAIN CON, INC.,

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1747 TINKER DR. LUTZ, FL 33549

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE TRAINING IN DIFFERENT SECTORS.

ARTICLE IV SHARES

The number of shares of stock is:

SIX

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

JOSE M. MORALES 1747 TINKER DR. LUTZ, FL 33549

CECILIA M. MORALES 1747 TINKER DR. LUTZ, FL 33549

JOSE R. MORALES 1835 CRAVEN DR. LUTZ, FL 33549

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JOSE M. MORALES

1747 TINKER DR.

LUTZ, FL 33549

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

JOSE M. MORALES

1747 TINKER DR.

LUTZ, FL 33549

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8-9-00

Date



Signature/Incorporator

8-9-00

Date

FILED
00 SEP 11 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA