# P040000 95860

(Requesto	r's Name)
(Address)	
(Address)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Document	t Number)
Certified Copies	Pertificates of Status
Special Instructions to Filing C	Officer:

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DIVISION 23 PM 2: 16

# TRANSMITTAL LETTER

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

SUBJECT: Know It All Training & Continuing Education Solutions, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

nosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
		<u> </u>	

FROM:	Beth A. Moriarty
	Name (Printed or typed)
	698 N. Maitland Avenue
	Address
	Maitland, FL 32751
	City, State & Zip
	407-647-2448-203
	Daytime Telephone number

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

04 JUN 23 PM 2: 16

DIVISION OF CAMP-SATION

# ARTICLES OF INCORPORATION

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

## ARTICLE I

The name of the corporation shall be:

Know It All Training & Continuing Education Solutions, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

698 N. Maitland Avenue, Maitland, Florida

### ARTICLE III *PURPOSE*

The purpose for which the corporation is organized is:

Provide continuing education opportunities and training to attorneys and claims professionals.

### ARTICLE IV SHARES

The number of shares of stock is:

One Thousand

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Beth A. Moriarty, President, Secretary, Treasurer 698 N. Maitland Avenue Maitland, FL 32751

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Beth A. Moriarty 698 N. Maitland Avenue Maitland, FL 32751

### ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

Beth A. Moriarty 698 N. Maitland Avenue Maitland, FL 32751

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

Signature/Incorporator

6/21/04 Date 6/21/04