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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUL 18 2005

TRANSMITTAL LETTER

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

SUBJECT: Leadership Dimensions, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Sandra G. Shannon

Name (Printed or typed)

21200 North Miami Avenue

Address

Miami, Florida 33169

City, State & Zip

305-469-8328

Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Leadership Dimensions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

21200 North Miami Avenue
Miami, Florida 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Training to profit and non-for-profit organizations in leadership principles and team building of human resources

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sandra G. Shannon, 21200 North Miami Avenue, Miami, Florida 33169, Chief Executive Officer
Wilfred Shannon, 21200 North Miami Avenue, Miami, Florida 33169, Operations Officer

ARTICLE VI REGISTERED AGENT

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

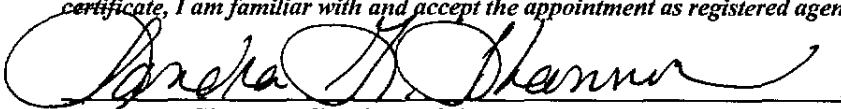
Sandra G. Shannon,
21200 North Miami Avenue
Miami, Florida 33169

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sandra G. Shannon,
21200 North Miami Avenue
Miami, Florida 33169

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

7/13/05
Date


Signature/Incorporator

7/13/05
Date

FILED
05 JUL 15 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA