(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: Call When Ready Terric (81-6788)				

Office Use Only



400097658804

05/02/07--01002--008 **70.00

MAY -1 PH 12: 43 FILED

COVER LETTER

FILED

07 MAY -1 PN 12: 43

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT: Florida Hospitality Training Institute, Inc.				
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
Filing Fee Filing F & Certif		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Harolo	d F.X. Purnell Name (Printed or typed)		

215 South Monroe Street, Suite 420

Tallahassee, Florida 32301-1841

(850) 681-6788

Address

City, State & Zip

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:

Florida Hospitality Training Institute, Inc.

FILED

07 MAY - 1 PM 12: 43

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

848 Executive Drive, Suite 100 Oviedo, Florida 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The transaction of any lawful purpose for which corporations may be incorporated under the Florida Business Corporation Act.

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):

James A. Greer, Director Florida Hospitality Training Institute, Inc. 848 Executive Drive, Suite 100 Oviedo, Florida 32765

ARTICLE VI REGISTERED AGENT

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

Harold F.X. Purnell, Rutledge, Ecenia, Purnell & Hoffman, P.A. 215 South Monroe Street, Suite 420 Tallahassee, Florida 32301-1841

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James A. Greer 848 Executive Drive, Suite 100 Oviedo, Florida 32765

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/Incorporator

5 / 7

Date

5 / 7

Date