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FILED

2008 OCT 14 P 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature

COVER LETTER

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

SUBJECT: MEDICALTRAININGCLASSES.COM, 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
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:

Vanessa Guy

Name (Printed or typed)

661 - 679 SOUTH BROAD ST.

Address

BROOKSVILLE, FLORIDA 34601

City, State & Zip

352 293-2474

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2008

VANESSA GUY
661 - 679 SOUTH BROAD ST
BROOKSVILLE, FL 34601

SUBJECT: MEDICALTRAININGCLASSES.COM, INC. AKA M.T.C. PREP
Ref. Number: W08000045600

RECEIVED
08 OCT 14 AM 04 00
CORPORATION DIVISION

We have received your document for MEDICALTRAININGCLASSES.COM, INC. AKA M.T.C. PREP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can only file one name per application. You will have to remove AKA M.T.C. Prep from your application. If you want to use M.T.C. Prep as a doing business name you will need to complete a fictitious name application which you can either download from our website.

Please return 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) 245-6913.

Diane Cushing
Document Specialist Supervisor

Letter Number: 108A00052428

FOR MORE INFORMATION, PLEASE VISIT OUR WEBSITE AT www.flsos.org.
USING ADOBE PDF READER, YOU MAY PRINT OR SAVE THIS DOCUMENT.
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OUR WEBSITE AT www.flsos.org FOR MORE INFORMATION.

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:

MEDICALTRAININGCLASSES.COM, INC.

~~AKA THE PREP~~

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

661-679 SOUTH BROAD ST. BROOKSVILLE, FL 34601

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PREPARE ADULTS FOR CAREER CHANGES

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):

VANESSA GUY / DIRECTOR

ARTICLE VI REGISTERED AGENT

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

VANESSA GUY
679 SOUTH BROAD ST.
BROOKSVILLE, FL 34601

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VANESSA GUY
SAME

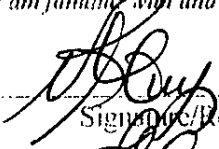
679 SOUTH BROAD ST.
BROOKSVILLE, FL 34601

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

09-17-08

Date

09-17-08

Date