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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

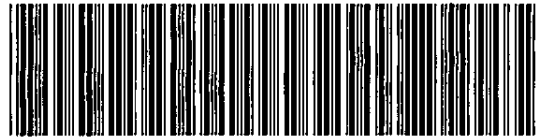
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRD  
8/6

## COVER LETTER

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

**SUBJECT:** JSR TRAINING, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** DAVID C HASTINGS CPA  
Name (Printed or typed)

2207 54TH ST S  
Address

GULFPORT, FL 33707  
City, State & Zip

727-322-5669  
Daytime Telephone number

DAVIDCPA@TAMPABAY.RR.COM  
E-mail address: (to be used for future annual report notification)

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

**David C Hastings, CPA, PA**  
**2207 54<sup>th</sup> Street South**  
**Gulfport, FL 33707**  
**727-322-0909**  
**Fax 727-322-0520**

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TALLAHASSEE FLORIDA

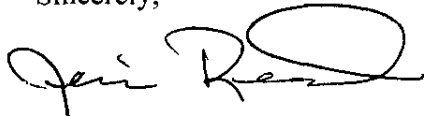
July 17, 2009

Department of State  
Division of Corporate Filings  
PO Box 6327  
Tallahassee, FL 32314

Re: Dissolution of Non Profit Corporation, JSR Training, Inc.  
Formation of Profit Corporation JSR Training, Inc.

The undersigned officer of the former non profit corporation, JSR Training, Inc. and the new profit corporation JSR Training, Inc. certifies that the dissolution of JSR Training Inc. will not be undone and wishes to release the name JSR Training, Inc. so that it can be used for the new profit corporation.

Sincerely,



Jeri Reed  
President  
JSR Training, Inc.

**ARTICLES OF INCORPORATION**

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

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**ARTICLE I NAME**

The name of the corporation shall be: JSR TRAINING, INC.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

5213 11TH AVE S  
GULFPORT, FL 33707

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO CONDUCT ANY LEGAL BUSINESS IN THE STATE OF FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JERI REED PRESIDENT, SECRETARY, TREASURER AND DIRECTOR  
5213 11TH AVE S  
GULFPORT, FL 33707

**ARTICLE VI REGISTERED AGENT**

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

DAVID C HASTINGS  
2207 54TH ST S  
GULFPORT, FL 33707

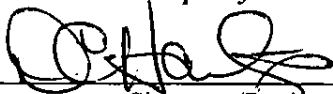
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

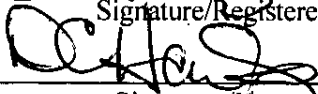
DAVID C HASTINGS  
2207 54TH ST S  
GULFPORT, FL 33707

\*\*\*\*\*

*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

07/17/2009

Date

07/17/2009

Date