

P/00000067054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

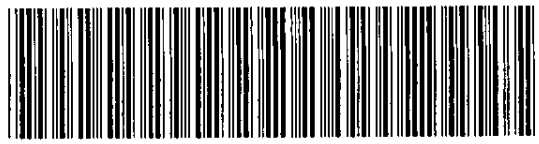
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100184113391

08/17/10--01002--023 **78.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2010 AUG 16 PM 5:03
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING
ALLAHASSE F. FLORIDA
FILED
10 AUG 16 PM 5:11
SECRETARY OF STATE

8/16/10

COVER LETTER

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

SUBJECT: Corporate Training USA, 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: Catherine Cassidy
Name (Printed or typed)

9009 Mahan Drive, Suite 501
Address

Tallahassee, Florida 32309
City, State & Zip

850-681-7233
Daytime Telephone number

Danielle@AmericanSafetyInstitute.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 AUG 16 PM 5:11

FILED

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:

Corporate Training USA, Inc.

ARTICLE II PRINCIPAL OFFICE

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

9009 Mahan Drive, Suite 500
Tallahassee, FL 32309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage in legal business

ARTICLE IV SHARES

The number of shares of stock is:

20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

P. Bart W. Cassidy

VPL/ST-Catherine Cassidy

9009 Mahan Dr. Ste 501
Tallahassee, FL 32309

ARTICLE VI REGISTERED AGENT

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

Catherine Cassidy
9009 Mahan Dr. Ste. 501
Tallahassee, FL 32309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Catherine Cassidy
9009 Mahan Drive Ste. 501
Tallahassee, FL 32309

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

Date

Date

FILED
10 AUG 16 PM 5:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA