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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| Special Instructions to Filing Officer: |
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TO ACKNOYLEDGE SUFFICIENCY OF FILIN DEPARIMENT OF STATE
DIVISION OF CORPORATION

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SECRETARY OF STATE

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## **COVER LETTER**

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

| nclosed are an origi    | inal and one (1) copy of the ar             | icles of incorporation and          | a check for:   |
|-------------------------|---|-------------------------------------|--|
| _ \$70.00<br>Filing Fee | \$78.75  Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status |

| FROM: Catherine Cassidy  | _  |     |
|--|--|-----|
| Name (Printell or typed)  9009 Mahan Drive, Suite 501  | 10 P<br>SEC<br>TALL                      |     |
| Address Address  | AUG 16<br>CRETAR<br>LAHAS                |     |
| Tallahassee, Florida 32309<br>City, State & Zip  | 10 A A A A A A A A A A A A A A A A A A A | i.u |
| 850-681-7233  Daytime Telephone number   | 5: 10<br>STATE<br>STATE<br>STATE         | O   |
| Danie 11e @ american safety institute E-mail address: (to be used for future annual report notification) | com                                      |     |

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:  |                        |
| USA Corporate Training, Inc.   |                        |
| ARTICLE II PRINCIPAL OFFICE  The principal street address and mailing address, if different is:  Q009 Manan Drive, Suite 501  Tallahassee, Florida 32309  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  to engage in legal business | TALLAHASSEE, FLORIDA   |
| 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): President-Bart W. Cassidy 9009 Manan Dr., Ste VP/S/T-Catherine Cassidy Tallahassee, Fl 323  |                        |
| ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is  Cathwrine Cassidy  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Catherine Cassidy  ADDA Manan Dr. Ste 501        | ;                      |
| Tauahassee, Fl 32309   |                        |
| Having been named as registered agent to accept service of process for the above stated place designated in this certificate, I am familiar with and accept the appointment as range agree to acf in this capacity   |                        |
|  | <u>e/2010</u>          |
| Signature/Registered Agent  8/16   | <u> 12010</u><br>12010 |

Signature/Incorporator