

P14000042979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

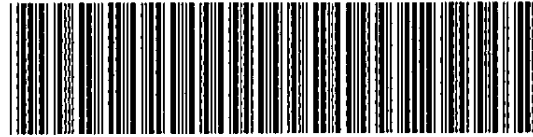
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAY 14 PM 4:58

2014 MAY 14 AM 8:34

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

1/17

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

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5114

☐ **CERTIFIED COPY**

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1.

Digital Training Solutions Inc
(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

Digital Training Solutions Inc.

2014 MAY 14 AM 8:34

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1 Huntington Quadrangle

Suite 1N03

Melville NY 11747

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

publishing

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jon D. Werz, Director

Name and Title:

Address: 1 Huntington Quad

Address:

Suite 1N03

Melville NY 11747

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS

2014 MAY 14 AM 8:34

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Corporate Access, Inc.
Address: 236 East 6th Avenue
Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ruth A. Dennehey
Address: 111 Washington Ave
Albany NY 12210

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]
Required Signature/Registered Agent

5/14/14
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]
Required Signature/Incorporator

5/14/14
Date