

P14000054012

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

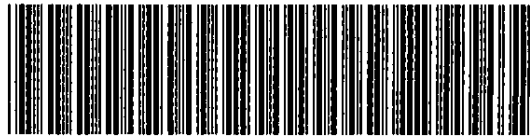
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000259789820

06/17/14--01016--006 \*\*137.50

FILED  
14 JUN 17 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6/23/14

**COVER LETTER**

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

**SUBJECT:** SkillsPlus International Inc. Domestication

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

**FEES:**

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

**OPTIONAL:**

Certificate of Status \$ 8.75

Allan Dewes

Name (printed or typed)

300 E. Oakland Park Blvd #368

Address

Fort Lauderdale, FL 33334

City, State & Zip

954.873.7422

Daytime Telephone Number

allan.dewes@skillsplusinc.com

E-mail address: (to be used for future annual report notification)

FILED  
14 JUN 17 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## CERTIFICATE OF DOMESTICATION

The undersigned, Craig Allan Dewes, President and Secretary,  
(Name) (Title)

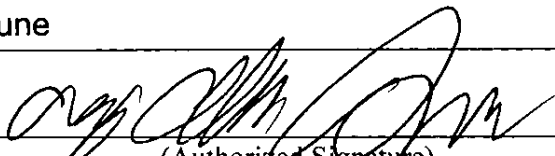
of SkillsPlus International Inc. a foreign corporation,  
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was June 12, 1998.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was San Francisco County, San Francisco, CA.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was SkillsPlus International Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is SkillsPlus International Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was  
San Francisco, CA
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am Allan Dewes, President and Sec., of SkillsPlus International Inc.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 12 day of June, 2014.

  
(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

FILED  
14 JUN 17 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

FILED

14 JUN 17 PM 1:46

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

SkillsPlus International Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

516 NW 20th Street

300 E. Oakland Park Blvd #368

Wilton Manors, FL

Fort Lauderdale, FL

33311

33334

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

The provide training and development services.

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: 10,000

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

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

President, Allan Dewes

Title/Name

Secretary, Allan Dewes

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Allan Dewes

516 NW 20th Street

Wilton Manors, FL 33311

**ARTICLE VII INCORPORATOR**

THE **NAME AND ADDRESS** OF THE INCORPORATOR IS:


Allan Dewes

300 E. Oakland Park Blvd #368

For Lauderdale, FL 33334

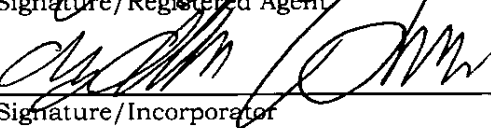
\*\*\*\*\*

**HAVING BEEN NAMED AS REGISTERED AGENT AND 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

12 June, 2014

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12 June, 2014

\_\_\_\_\_  
Date

FILED  
14 JUN 17 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA