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FLORIDA PROFIT/NON PROFIT CORPORATION ARISTA TRAINING INC

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OCT 05 2017

H17000261070 3

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ARISTA TRAINING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1016 Stella Vara Drive Lutz, Florida 33548

91 16 NW N= 130 ZI

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1500 at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Phillip M. Govinda 1016 Stella Vara Drive Lutz, Florida 33548

Prepared By:
Bruce B. Hubbard
238 W. Jericho Turnpike
Huntington Sta., NY 11746
1-516-935-3940

H17000261070 3

ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

PHILLIP M. GOVINDA-PRESIDENT/DIRECTOR-1016 STELLA VARA DRIVE, LUTZ, FLORIDA 33548 MICHAEL GOVINDA-VICE PRESIDENT/DIRECTOR-1016 STELLA VARA DRIVE, LUTZ, FLORIDA 33548

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

PHILLIP M. GOVINDA-1016 STELLA VARA DRIVE, LUTZ, FLORIDA 33548 MICHAEL GOVINDA-1016 STELLA VARA DRIVE, LUTZ, FLORIDA 33548

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

2ND day of OCTOBER 20 2017

Michael Geninac

PHILLIP M. GOVINDA

Signature

MICHAEL GOVINDA

Signature

H17000261070 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

2. The name and address of the registe	red agent and office is:
	Phillip M. Govinda
	Name
	1016 Stella Vara Drive
	(P.O. Box or Mail Drop Box NOT Acceptable)
	Lutz, Florida 33548
	(City / State / Zip)
corporation at the place designated agent and agree to act in this capac	gent and to accept service of process for the above stated in this certificate, I hereby accept the appointment as registered ity. I further agree to comply with the provisions of all the statutes performance of my duties, and am familiar with and accept the red agent.
Phillip M. Govinda SIGNATURE	10/02/2017 (Date)

1. The name of the corporation is: ARISTA TRAINING INC