TRANSMITTAL LETTER

(Broposed corporate name - must include suffix)

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

SUBJECT:

1 DCDD 1 SBD 9 7 1 -07/02/96--01005--024 ****131.25 ****131.25

Enclosed is an origing for: \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	nd a check
PMP 96 FROM	Sussin B Name	Summers Maga Placemen (printed or typed)	+ + Training In c
۱ .	7027 W	Broward Blod # 232 Address	77 C
	Ft L	audendale Fc 33317 ry, State & Zip	Trisicior consonarion
η_{ϵ} . χ	95 L/ - Daytime	- <u>584-3450</u> Telephone number	\$ W
Mari	,	-584-3423 FAX)	FILED 96 JUL-I PH 4 SECKE PAR GER TALLAHASSEE FL

NOTE: Please provide the original and one copy of the articless

ARTICLES OF INCORPORATION

FILED

96 JUL - 1 PH 1/28

SECING OWNER OF STATE

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

> ARTICLE I NAME

The name of the corporation shall be:

Mega Placement + Training, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7027 W Broward Blod # 232 · FL 33317

SHARES

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

100.

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

Susan B. Summers 1015 W. Country (lub Cir Pluntation FL 33317

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Susan B. Summers
1015 W. Country Club Cir (954-554-0171)
Plantation FL 33317

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

1 day of July , 19 96.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

F11.ED 96 JUL - 1 P11 1:28

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

1. The name of the corporation is:	Mega Placem	nt + Training Inc

2. The name and address of the registered agent and office is:

SUSAN B SUMINEYS
(NAME)

1015 W Country Club Cir
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Plantation F- 333)7
(CHY/STATE/ZIP)

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 hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

June Barren 7/1/96
(SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314