P970 CANSINETTER 84263

Department of State Division of Corporations P.O. Box 6327 Tallalussee, Florida 32314

100002293531--5 -09/15/97--01146--002 ****122.50 ****122.50

SUBJECT: TRAINING RESOURCES 2000, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for

\$ 122.50 Filing Fee and Certified Copy

FROM TRAINING RESOURCES 2000, INC.

2767 20767 Horseshoe Court Sarasota, Florida 34235 941 - 379,2488 378- 2488

NOTE: please provide the original and one copy of the articles.

FILED

97 SEP 29 M 9: 05

SECULTATIONS SEE, FLORIDA





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 17, 1997

TRAINING RESOURCES 2000, INC. 2767 HORSESHOE COURT SARASOTA, FL 34235

SUBJECT: TRAINING RESOURCES 2000, INC.

Ref. Number: W97000021380

We have received your document for TRAINING RESOURCES 2000, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Dana Calloway Document Specialist

Letter Number: 697A00046102



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: TAAINING RESOURCES 2000 INC.

ARTICLE II PRINCIPAL OFFICE

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

2767 HORSESHOE CT. SARASOTA, FL. 34235

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $100 \, \odot \, \#_{1.00}$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sushn Eisman 2767 Horseshoe Ct. Sarnsota, Fl. 34235

FILING FEE: \$70.00

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 EISMAN 2767 HORSESHOE CT. SARASOTA, FL. 34235 GERALD EISMAN 2767 HORSESHOE CT. SARASOTA, FL. 34235 J.MICHELLE CARLA 2767 HORSESHOE CT. SARASOTA, FC. 34235

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

_____25 day of SEPT .1997

Mechallo Forb

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	TRAINING)	RESOURCES	_2000	INC.
2. The name and address of the regi	stered agent and off	fice is:		
SUSAN	EISMAN (Name)		7	
2767 (P.O.	HORSESHOE Box not acceptable)	CT.		G
SARAS		1 235		
Having been named as registered at above stated corporation at the place	gent and to accept s e designated in this	ervice of process for a	the ccent	

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.

(Signature) 9-26-97
(Date)

COUNTY OF SARASOTA) SS STATE OF FLORIDA

The foregoing instrument was acknowledged before me this // day of
September, 1997, by Susan Eisman, who is personally known to me or who produced

Aus maly known—as identification and who did/did not to _ as identification and who did/did not take

Notary Public,

My commission expires:

OFFICIAL NOTARYSEAL
CHRIS GROSJEAN
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC574227
MY COMMISSION EXP. AUG. 11,2000