Department of State

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

400002336204--5

-11/03/97--01088--009

PARADIGM TRAINING SYSTEMS.
(Proposed corporate name - must include suffix) **SUBJECT:**

Enclosed is an original a	and one(1) copy of the artic	les of incorporation and a	check for:	1-01-40
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
	ADDITIONAL COPY REQUIRED]
				97 NOV -
-	PENSACOLA City	4 FL 32514- , State & Zip	C) 36 For	ED 3 M 7: 24
-	(850) 479 Daytime T	Celephone number		

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

ARTICLES OF INCORPORATION

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

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Paradigm Training Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

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



7761 Northpointe Boulevard, Pensacola, FL 32514

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Bruce A. McDonald, 7761 Northpointe Blvd., Pensacola, FL 32514

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Bruce A. McDonald, 7761 Northpointe Blvd., Pensacola, FL 32514

Signature/Incorporator Date

ARTICLE VI EFFECTIVE DATE

The effective date of the incorporation is:

January 1, 1998

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/Registered Agent Date