POSCHAGINETAL CENTER 2491

(Proposed corporate name - must include suffix)

500002359525--4 -12/01/97--01147--007 *****131.25 ****131.25

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

| Enclosed is an origina for: | | | . A. | and a check |
|-----------------------------|--------------------------|--------------------------------------|---|-----------------|
| \$70.00 Filing Fee | Filing Fee & Certificate | \$122.50 Filing Fee & Certified Copy | \$131.25 Filing Fee, Certified Copy & Certificate | |
| | , | Additional Copy | Required | 98. |
| FROM: |)ANICE Name | E LAVORE | <u> </u> | JAN _9.I. |
| | 6381 0 | OLD MEDINAH Address | CIR | SEE. FLORIB |
| | | WORTH AL | 33463 | > : 3 <u></u> - |
| | 56/ | 433 0 077 Telephone number | <u> </u> | ر ر |

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



Dear Rechion attended

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

December 4, 1997

JANICE E. LAVORE 6381 OLD MEDINAH CIR LAKE WORTH, FL 33463

SUBJECT: EXCELLENCE IN TRAINING, INC.

Ref. Number: W97000027084

We have received your document for EXCELLENCE IN TRAINING, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must have original signatures.

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) 487-6926.

Tracy Meyer Document Specialist

Letter Number: 097A00057307

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:

LAVORE CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

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

6381 OLD MEDINAH CIR LAKE WORTH FL 33463 PRIMARY OF STATE TALL AHASSEE, FLORIDA

ARTICLE III SHARES

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

1

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

JANILE LAVORE 6381 OLD MEDINAH CIR LAKE WERTH PL 33463

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):

JANICE E LAVORE (DIRECTOR)
6381 DLO MEDINAH CIR
LAKE WORTH FZ 33463

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

Signature

Signature

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, 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.

| The name of the corporation is: | | | | |
|---|---|--------------|-------------------|--|
| · · | LAVORE | CONSULTING, | ZNC. | |
| 2. The name and address of the register | ed agent and office is: | | | |
| JA | NICE E LAVORE | 98 JAN - | | |
| (P.O. Box of | OLD MED: NAH C Mail Drop Box NOT ACCEPTABLE) | PH 2: | 1 J | |
| Lake | WORTH FL 334 (CITY/STATE/ZIP) | <\mathcal{A} | - Î - | |

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) (DATE)

Jani, John Doc 26, 1987

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