P98000011436

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

SUBJECT:	Diversity	Training A	ssocrates, I	- 9 <i>C,</i> fix)	,	
		· 11	41	000024 -02/04/5 ******	38NIO32	4 004 **78.7
Enclosed is an o	original and one(1) cop	y of the articles of i	ncorporation and a cl	heck for :		
☐ \$70. Filing F	<i>y</i> • ·	Fee I	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Co & Certificat	17 1	
		A	ADDITIONAL COI	PY REQUIRE	D	
FROM: Martha R. Bireda Name (Printed or typed)						
P.O. Box 1017/ Address Address						*****
Tampa, FL 33679-617/ City, State & Zip (8/3) 870 - 2374 Daytime Telephone number					98 FEB -4 AM	
					AH 8: 10 GRATIONS EE, FLORIDA	O

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

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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.



ARTICLE I NAME

The name of the corporation shall be: Diversity Training Associates, Inc.

ARTICLE II PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be: The place of business shall be 213 S. Habana Avenue, Tampa, Florida, 33609; and the mailing address shall be P.O. Box 10171, Tampa, Florida 33679-0171.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address of the initial registered agent are: Martha R. Bireda, at 213 S. Habana Avenue, Tampa ,FL 33609.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Martha R. Bireda, P.O. Box 10171, Tampa, Florida 33679-0171.

marthe L. Bude	Feb. 1, 1998		
Signature/Incorporator	Date		

Having been named as registered agent and to accept service of process for the above date 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.

Martha R. Builda Signature/Registered Agent

Feb. 1, 1998 Date