

P98007712 923
TRANSMITTAL LETTER

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

800002425458--5
-02/09/98--01120--003
*****70.00 - *****70.00

SUBJECT: _____ NATIONAL INSTITUTE OF TRAINING AND HUMAN DEVELOPMENT, INC.

(Proposed corporate name - must include suffix)

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

X 70.00 78.75 122.50 131.25

FROM: _____ RANDY L. BOUTWELL _____
Name (printed or typed)

_____ 7633 ROTTINGHAM RD _____
Address

_____ PORT RICHEY, FL 34668 _____
City, State & Zip

_____ (813) 863-0568 _____
Daytime Telephone number

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

2-10-98
W5

ARTICLES OF INCORPORATION

OF

NATIONAL INSTITUTE OF TRAINING AND HUMAN DEVELOPMENT, INC.

The undersigned incorporation (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:

NATIONAL INSTITUTE OF TRAINING AND HUMAN DEVELOPMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

7633 ROTTINGHAM ROAD
PORT RICHEY, FL 34668

ARTICLE III CAPITAL STOCK

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

100 SHARES NON-PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES H. COLLIER SR.
1102 FUCHSIA DRIVE
HOLIDAY, FL 34691

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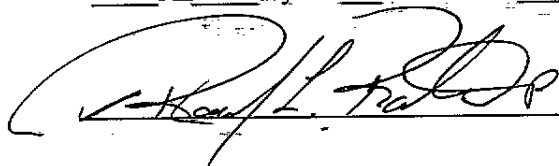
ARTICLE V INCORPORATOR(S)

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

RANDY L. BOUTWELL
7633 ROTTINGHAM ROAD
PORT RICHEY, FL 34668

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

____ 5th ____ day of ____ FEBRUARY ____, 1998 ____



____ Signature/Title

____ Signature/Title

____ Signature/Title

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 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:_____

NATIONAL INSTITUTE OF TRAINING AND HUMAN DEVELOPMENT, INC

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

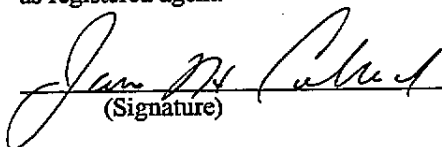
_____ JAMES H. COLLIER SR. _____
(Name)

_____ 1102 FUCHSIA DRIVE _____
(P. O. Box not acceptable)

_____ HOLIDAY, FL 34691 _____
(City/State/Zip)

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I have been named as registered agent and to accept service of process for the aboved 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)

2-5-98
(Date)

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