PLEASE READ ALL INS	TRUCTIONS BEFORE	LETING THIS FUNIVI.
APPLICATION FLORI	DA DEPARTMENT OF STA	
FOR	Sandra B. Mortham	1 1 2 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1
EINSTATEMENT	Secretary of State	The state of the s
A CONTRACTOR OF THE CONTRACTOR	DIVISION OF CORPORATIONS	
DCUMENT # 198 0000 12	1923	
Coporation Name		
National Institute of Training	And Hum Developme	01 100 00
Inc.	·	
柳思		SECRETARY OF STATES
ncipal Place of Business Mailing Address		SECRETARY OF STATES TALLAHASSEE, FLORIDA
The second secon		2 25 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
above addresses are incorrect in any way, line through incorrect		Starten Company
New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable  3. New Mailing Office Address, If Applicable  4.718 TROUBLE GOOD FOR		Date Incorporated or Qualified     To Do Business in Florida
ite, Apt. #, etc.		82-09-1998
ty & State City & State		5. FEI Number Applied For Applied For
	but Ray FL	6. Not Applicable
SUL 53 Country Zip 34/5	3 1/2500	CERTIFICATE OF STATUS DESIRED   58.75 Additional Fee require for a Certificate of Status
Names and Street Addresses of Each Officer and/or Director (F	<del></del>	least 3 directors)
Name of Officers	Street Address of Eac	ch
le(s) and/or Directors	Officer and/or Directo 3 (Do NOT Use Post Office Box	or City / State / Zip 4
Kondy Boutwell	6718 TROUBLE CREE	* Rd WawfortRidy FL 39453
	The second secon	
	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>200004136332</b> -15/04/010051028
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de Pige Alleria Alleria		
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[4] [4] [4] [4] [4] [4] [4] [4] [4] [4]		
		AS OLUGO
8. Name and Address of Current Registered Ag	ent Name	9. Name and Address of New Registered Agent
James H. Collier SR.		
7421 Beyt OAK Dr. Street Address		(P.O. Box Number is Not Acceptable)
PORTRICHEY FL 34668	Suite, Apt. #, Etc	с.
		·
	City	State Zip Code
1. being appointed the registered agent of the above married corp	oration, am familiar with and accept the o	
mature of	1	4 1 <del>4</del> 201
gistered Agent REGISTERED AC	SENT MUST SIGN	Date
This corporation owes or has paid the	No ourront voor	
Intangible Personal Property tax due	e June 30:	(See other side for information on intangible tax.)
A TOPERTY LAX CUE	, ourie ou. 168 L	3 1YO L-1
Certify that I am an officer or director or the receiver or trustee e	mpowered to execute this application as p	provided for in chapter 607 or 617, F.S. I further certify that when filling
owed by the corporation have been paid and the names of individ	luals listed on this form do not qualify for ,	s the requirements of section 607.0401 or 617.0401, F.S., that all fees an exemption under section 119.07(3)(i), F.S. The information indicated
on this application is true and accurate, and my signature shall ha	المارين الماريني المراجع والمساهم المستمل وطورها	and the same of th
61.51. 64.61.	we the same legal effect as it made under	r Oatri.