TRANSMITTAL LETTER

Department of State Division of Corporations	0029	8/0
P. O. Box 6327 Tallahassee, FL 32314		<u>-</u>
Certification	1	-
SUBJECT: THE TRAINING A	CADEMY INC.	
(-2010-0011-0011-0011-0011-0011-0011-001	Nor	00028203510 -03/26/9901098005 *****87.50 *****87.50
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:		
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: JOHN S	ADDITIONAL COP	
3743 IRV	INGTON AF	FILE 99 MAR 26 SEGRETARY O TALLAHASSEE
COCONUT (City,	State & Zip	3138 FF 27 7 15

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:

ARTICLE I NAME

The name of the corporation shall be:

The Certification Academy Inc.

ARTICLE II PRINCIPLE OFFICE

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

3743 Irvington Ave Coconut Grove, FL 33133

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 INTIAL REGISTERED AGENT AND STREET ADDRESS

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

John Steele 3743 Irvington Ave Coconut Grove, FL 33133

ARTICLE V INCORPORATOR

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

John Steele 3743 Irvington Ave Coconut Grove, FL 33133

Signature/Incorporator

Date

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

99 MAR 26 AM 7: 4(
SECRETARY OF STATE
AND ANASSEE FOR SOMA