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417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
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	Certificate of Good Standing
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	Certificate of Fictitious Name
	Corp Record Search
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# ARTICLES OF INCORPORATION

TALLAHASSEE, FLORIDA

of

# AUXILIARY TRAINED SERVICES, INC.

# FIRST:

The name of the Corporation shall be AUXILIARY TRAINED SERVICES, INC. The principal mailing address of the corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

### SECOND:

The purposes for which the corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

#### THIRD:

The corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

#### FOURTH:

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

# FIFTH:

The registered agent for the corporation shall be:

STANLEY A. GOLDSMITH 1605 Main Street, Suite 1001 Sarasota, Florida 34236

# SIXTH:

To the incorporator of AUXILIARY TRAINED SERVICES, INC.:

I understand my obligations as your Registered Agent and hereby accept appointment as your Registered Agent in accordance with F.S. 48.091.

STANLE**X** GOLDSMITH

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TALLAHASSEE, FLORIDA

# **SEVENTH:**

The initial Board of Directors of the corporation shall consist of one (1) member:

RUTH LANDERS 1605 Main Street, Suite 1001 Sarasota, Florida 34236

EIGHTH:

The incorporator of AUXILIARY TRAINED SERVICES, INC., who by his signature hereby acknowledges the adoption of these Articles of Incorporation, is:

STANLE & GOLDSMITH 1605 Main Street, Suite 1001 Sarasota, Florida 34236

STATE OF FLORIDA
COUNTY OF SARASOTA ) ss:

The foregoing Articles of Incorporation of AUXILIARY TRAINED SERVICES, INC., were acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_\_ 1999, by Stanley A. Goldsmith as incorporator. He is personally known to me or has produced \_\_\_\_\_\_ as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.

April R Fullford \_\_\_\_\_\_ April R Fullford \_\_\_\_\_\_ Signature of Notary Public \_\_\_\_\_\_\_ Print Name of Notary Public \_\_\_\_\_\_\_ Print Name of Notary Public

STATE OF FLORIDA ) COUNTY OF SARASOTA ) ss:

The foregoing Articles of Incorporation of AUXILIARY TRAINED SERVICES, INC., were acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_ 1999, by STANLEY A. GOLDSMITH, as Registered Agent. He is personally known to me or has produced \_\_\_\_\_ as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.

April R Fullford

Wy Commission CC720729

Expires March 1, 2002

Signature of Notary Public

Print Name of Notary Public

I am a Notary Public of the State of

RIDA, and my commission

expires on 3 | 1 2002

I am a Notary Public of the State of Old DA, and my commission

expires on