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TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: BPMCN, INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CINDY MCCLARY

(Name of Person)

BPMCN, INC.

(Firm/Company)

175 SAND CLIFFS DRIVE

(Address)

PANAMA CITY, FL 32413-7112

(City/State/Zip)

BEACH

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*****78.75 *****78.75

W-14643

Should you need to call someone concerning this matter, please call:

MICHAEL CAMPBELL

(Name of Person)

at (850) 474-1536

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
00 JUN 13 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mt
6/14



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 9, 2000

CINDY MCCLARY
175 SAND CLIFFS DRIVE
PANAMA CITY BEACH, FL 32413-7112

SUBJECT: BPMCN, INC.
Ref. Number: W00000014643

We have received your document for BPMCN, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays
Document Specialist

Letter Number: 000A00033002

FILED
00 JUN 13 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. BPMCN, INC.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. TEXAS

(State or country under the law of which it is incorporated)

3. 76-0624971

(FEI number, if applicable)

4. 11/30/99

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. MAY 31, 2000

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 175 SAND CLIFFS DR.

PANAMA CITY, FL 32413-7112

(Current mailing address)

BEACH

8. ADMINISTRATIVE SERVICES FOR OFFICES OF MEDICAL PRACTITIONERS

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: CINDY MCCLARY

Office Address: 175 SAND CLIFFS DR

PANAMA CITY BEACH

, Florida, 32413-7112

(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Cindy McClary
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - - P.O. Box **NOT** acceptable)

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JUN 13 PM 1:01
STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____
_____**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**President: BARBARA DUNNAddress: 5008 WEDGEWOOD DRBELLAIRE, TX 77401CEO ~~XXXXXX~~ ROSE MARIE BISTANYAddress: 212 SUGARBERRY COURTNASHVILLE, TN 37211VP/Secretary: CINDY MCCLARYAddress: 175 SAND CLIFFS DRPANAMA CITY, FL 32413Treasurer: BeachAddress: _____
_____**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. Cindy McClary, Vice Pres / Sec.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. CINDY MCCLARY

(Typed or printed name and capacity of person signing application)

FILED
00 JUN 13 PM 1:01
TALLAHASSEE, FLORIDA
SECRETARY OF STATE



The State of Texas
Secretary of State

CERTIFICATE OF INCORPORATION
OF

BPMCN, INC.
CHARTER NUMBER 01560021

THE UNDERSIGNED, AS SECRETARY OF STATE OF THE STATE OF TEXAS,
HEREBY CERTIFIES THAT THE ATTACHED ARTICLES OF INCORPORATION FOR THE
ABOVE NAMED CORPORATION HAVE BEEN RECEIVED IN THIS OFFICE AND ARE
FOUND TO CONFORM TO LAW.

ACCORDINGLY, THE UNDERSIGNED, AS SECRETARY OF STATE, AND BY VIRTUE
OF THE AUTHORITY VESTED IN THE SECRETARY BY LAW, HEREBY ISSUES THIS
CERTIFICATE OF INCORPORATION.

ISSUANCE OF THIS CERTIFICATE OF INCORPORATION DOES NOT AUTHORIZE
THE USE OF A CORPORATE NAME IN THIS STATE IN VIOLATION OF THE RIGHTS OF
ANOTHER UNDER THE FEDERAL TRADEMARK ACT OF 1946, THE TEXAS TRADEMARK LAW,
THE ASSUMED BUSINESS OR PROFESSIONAL NAME ACT OR THE COMMON LAW.

00 JUN 3 1 01
FILED
SECRETARY OF STATE
FALLS CHURCH, VIRGINIA

DATED NOV. 30, 1999

EFFECTIVE NOV. 30, 1999



A handwritten signature in black ink, appearing to read "Elton Bomer".

Elton Bomer, Secretary of State