F07000002856

TO:	Registration Section Division of Corporations
SUBI	
Б СД (ECT: Castle Properties Unlimited, Inc. (Name of corporation - must include suffix)
Dear S	ir or Madam:
"Certif	iclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", ficate of Existence", and check are submitted to register the above referenced foreign corporation sact business in Florida.
Please	return all correspondence concerning this matter to the following:
Cathy]	L. Lucrezi, Attorney
	(Name of Person)
	Cathy L. Lucrezi, P.A.
	(Firm/Company) 700056323805 1500 Colonial Blvd:, Suite 214 -85/05/0201066008 *****78.75 *****78.75
	*******78.75 *****78.75 ******78.75 ************************************
	Fort Myers, FL 33907
	(City/State and Zip code)
	ther information concerning this matter, please call:
	(Name of Person) at (239) 931-6044 (Area Code & Daytime Telephone Number)
	(Name of Ferson) (Area Code & Daytime Telephone Number)
Regista Divisio 409 E. Tallaha	ET ADDRESS: ation Section Registration Section Division of Corporations Gaines St. p.O. Box 6327 Tallahassee, FL 32314 ed is a check for the following amount:
	Qm ω
□ \$70	.00 Filing Fee S78.75 Filing Fee & \$78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy
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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. <u>Castle Properties Unlimited, Inc.</u> (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. Nevada 3. 84-1583492
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. <u>September 19, 2000</u> 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qulaification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1907 NW 9th Place, Cape Coral, FL 33993-4037 (Principal office address)
5100 S. Cleveland Ave., Suite 318, Fort Myers, FL 33907
(Current mailing address)
8. Property Management and real estate investment
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Fred W. Pollard
Office Address: 1907 NW 9th Place
mile or a second
Cape Coral, FL , Florida 33993-4037 (City) (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

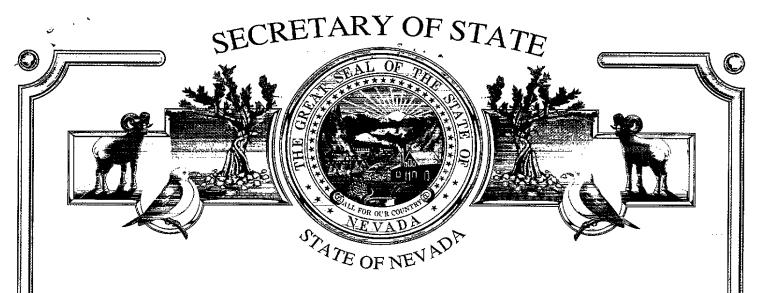
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(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 business addresses of officers and/or directors:

A. DIRECTOR	S
Chairman:	Fred W. Pollard
Address:	5100 S. Cleveland Ave., Suite 318, PMB 380, Fort Myers, FL 33907
Vice Chairman:	Gail Pollard
Address:	5100 S. Cleveland Ave., Suite 318, PMB 380, Fort Myers, FL 33907
Director:	
Address:	
Director:	· ·
Address:	De la companya de la
B. OFFICERS	HASSER FIL
President:	Fred W. Pollard
Address:	5100 S. Cleveland Ave., Suite 318, PMB 380, Fort Myers, FE 33907
Vice President:	Gail Pollard
Address:	5100 S. Clveland Ave., Suite 318, PMB 380, Fort Myers, FL 33907
Secretary:	Gail Pollard
Address:	5100 S. Cleveland Ave., Suite 318, PMB 380, Fort Myers, FL 33907
Treasurer:	Gail Pollard
Address:	5100 S. Cleveland Ave., Suite 318, PMB 380, Fort Myers, FL 33907
	sary, you may attach an addendum to the application listing additional officers and/or directors.
13.	Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	Fred W. Pollard, President (Typed or printed name and capacity of person signing application)



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CASTLE PROPERTIES UNLIMITED, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 19, 2000, and is in good standing in this state.

DATE OF THE PARTY OF THE PARTY

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on May 25, 2002.

DEAN HELLER Secretary of State

Certification Clerk