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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: GTP Management, Inc.
SUBJECT: GTP Management, 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:
LOTEDALE S. PETRYL
(Name of Person)
GTP Management INC
GTP Management INC (Firm/Company)
112 Wiley Eaiste Cover (Address)
(Address)
WashStock, 64 30188 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) at (C1B) 283-3/5! (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$87.50 Filing Fee, Certificate of Status & Certified Copy Certified Copy

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. GTI Management Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. 4-3-02 5. PERPETUA _____
(Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual") 6. UPON CNAUFICATION (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. BBOI COLLEGE PARKWAY SUITE 2 FT. MYGRE, PL. 33919

(Principal office address)

112 WILEY BRIDGE COURT, WOODSTOCK, GA 30188

(Current mailing address) 8. All LEGAL AND LAWFOIL BUSINESS

(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: GEORGE PETRYK Office Address: BBOI COUESE PARKWAY, STE 2

FT. MYEAS, FL., Florida 32919

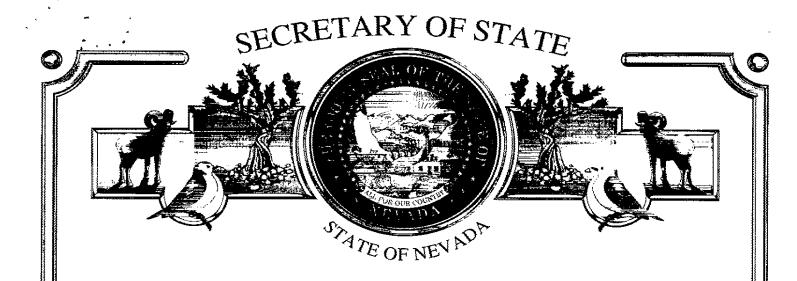
(City) (Zip code) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree 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 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. DIRECTORS
Chairman: N/A
Address:
Vice Chairman: N/A
Address:
Director: _ N/A
Address:
Director: N/A
Address:
B. OFFICERS
President: GEORGE PETRYK
Address: //2 Wrigy Bridge COURT WOODSFOCK GA 30188
Vice President: SAMC M. ABOVE
Address:
Secretary: LAME AS Aboys
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addepaths to the application listing additional officers and/or directors.
13.
(Signature of Director or Officer listed in number 12 of the application)
14. Series S Veryle Pars 11 ever (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, non-profit corporations, corporation soles, 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, **GTP MANAGEMENT, 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 April 3, 2002, and is good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand And affixed the Great Seal of State, at my office, in Carson City, Nevada, on November 14, 2003.

Dean Heller

Secretary of State

Cartification Clark