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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: BTB Enterprises, 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:				
Brenda Hudnall				
(Name of Person)				
BTB Enterprises, Inc.				
P.O. Box 16485 30 30				
(Address)				
Jacksunville, FL 32245-6485 (City/State and Zip code)				
(City/State and Zip code)				
For further information concerning this matter, please call:				
O COMPANY OF THE COMP				
Brencia Hudnall at (904) 646-9327				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is a check for the following amount:				
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ Certificate of Status & 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. BTB Enterprises, 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) Nevada
(State or country under the law of which it is incorporated)

3. 38-3692070
(FEI number, if applicable) (FEI number, if applicable)

October 30, 2003

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual") (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.) E. Flamings #155 Las Vegas
(Principal office address) P.O. Box 16485 Jacksonville, F) (Current mailing address) eal Estate Investments & Mortgage Broker School (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) Office Address: 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 dutics, and I am familiar with and accept the obligations of my position as registered agent.

- 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. DIREC	CŢORS	·
Chairman:	Brenda J. Hudnall	711.yr 3
• Address: _	9782 Nimitz CTS	
	JACKSONVILLE, FL 32246	
Vice Chairr	man:	<u> </u>
Address: _	<u> </u>	
	Barbara J. Kizer	
Address: _	9782 NIMITZ G5	~
	JACKSONVICLE, FL 33246	
	Timothy L. Hudnall	= '
Address: _	9782 NIMITZ CTS	<u>-11</u> -
_	JACKSONVILLE, FL 32246	
B. OFFIC		
President:	BRENDA J HUDNALL	
Address: _	9782 NIMITZ GTS	
~~	JACKSONVILLE, FL 32246	
Vice Presid	lent:	
Address: _		
_		<u></u> .`
Secretary:	TIMOTHY L. HUDNALL	
Address: _	9782 NIMITZ CT S. JAKKSONVILLE, FL 32246	
Treasurer:	BARBARA J. KIZEK	
Address: _	9782 NIMITZ CTS. JACKSONVILLE, FL 32246	<u> </u>
North I		
NOTE: H	f necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. <u>K</u>	(Signature of Director or Officer listed in number 12 of the application)	
14.		m. v =
	(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 thereby certify that I am, by the laws of said State, the custodian of the records relating to fillings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to 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 **BTB ENTERPRISES**, 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 October 30, 2003, 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 18, 2003.

Dean Heller Secretary of State

Ву

Certification Clerk