DO 200036393
TRANSMITTAL LETTER

Form 1

COMPANIES PARISON

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

BFPI PROPERTY MANAGEMENT CORP.

SUBJECT:

(Proposed corporate name - must include suffix)

300005174483--4 -03/28/02--01038--013

*****280.00 *****70.00

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

□ \$78.75

Filing Fee

& Certificate

□ \$122.50

□ \$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:

DAN ELLIS

Name (Printed of typed)

849 S. EDGEWOOD AVE

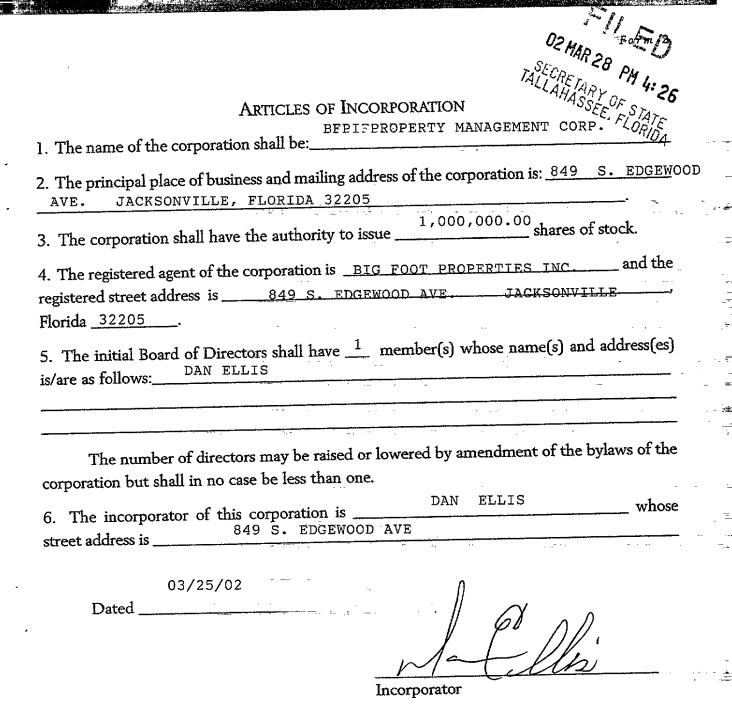
Address

JACKSONVILLE, FLORIDA 32205

City, State & Zip

904 389-5850

Daytime Telephone number



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

03/25/02 Dated

Registered Agent