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TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	JEFF RAPAPORI Name (Printed or typed) 1745 CORAL RIDGE DR. Address		
•	Copal Sorwas City 954-346-8 Daytime	FL 3307 State & Zip 754-366 Telephone number	

SUBJECT: BIAKE & RYANNE FINANCIAL GROUP INC. (PROPOSED CORPORATE NAME-MUST INCLUDE SUTTEX)

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	FILED
The name of the corporation shall be:	03 NOV 14 PM 2: 04
BLAKE & RYANNE FINANCIAL GROUP INC.	SECRETARI LE STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	TACEATAGGE, TEORIDA
The principal place of business/mailing address is:	
1745 CORAL RIDGE DR. CORAL SPRINGS, FL	33071
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
FWANCIAL SERVICES (IE. MORTGAGES, PROPE	very FIC)
ARTICLE IV SHARES The number of shares of stock is:	
ONE	
List name(s), address(es) and specific title(s):	<u>-</u>
JEFF RAPAPORT PRESIDENT	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
JEFF RAPAPORT 1745 COROL RIDGE DR.	
CORAL SPRINGS, FL 33071	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	en e
JEFF RAPAPORT	
THE CODY 2 WE DR.	
CORAL SPRNOS, PL JOUTT	***********
Having been named as registered agent to accept service of process for the above state certificate, I am familiar with and accept the appointment as registered agent and agree	
Che hart	ulalas
Signature/Registered Agent	Date
be the	11/9/03
	Kikilaa/