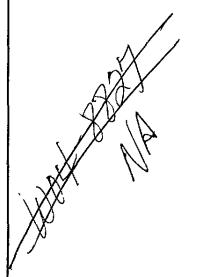
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(Re	equestor's Name)	
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TRANSMITTAL LETTER

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

SUBJECT: BES	STS RENTALS INCORPORA	NTED	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>ndernary</u>)
			,
Enclosed are an original	ginal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70,00	 \$78.75	\$78.75	X \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: _li	a A. Fox		
<u></u>	Name	(Printed or typed)	
	13321 SW 104 Avenue		
		Address	
	Miami, Fl. 33176		
	City,	State & Zip	
	305-233-5917		
	Daytime T	elephone number	······································

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 4, 2004

IRA A FOX 13321 SW 104TH AVENUE MIAMI, FL 33176

305 279.3240 WK 305-2335917 km

SUBJECT: BESTS RENTALS INCORPORATED

Ref. Number: W04000008827

We have received your document for BESTS RENTALS INCORPORATED. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P95000055361.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Document Specialist
New Filings Section

Letter Number: 704A00014512

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the cornoration shall be:	
BESTS Rentals Incorporated	T 11
BESTS Rentals Incorporated D AND I BESTS RENTALS	Incorporated
ARTICLE II PRINCIPAL OFFICE	1
The principal place of business/mailing address is:	
13321 SW 104 Avenue Miami , Fl. 33176	
10021 OT 10 17 17 01 00 11 00 11 0	7
	AL SE SE
ARTICLE III PURPOSE	CS
The purpose for which the corporation is organized is:	₹Ö ₹ TI
Apartment Rentals and leasing	SSS
•	EX S
	EFF > M
ARTICLE IV SHARES	WINTER A & 33
The number of shares of stock is:	
100	\mathcal{F} \mathcal{G}
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Ira A. Fox President	
Debbie A Fox Sec/Treasurer	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
ira A. Fox	
13321 SW 104 Avenue	
Miami, Fl. 33176	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Ira A. fox	
13321 SW 104 Avenue	
Miami, FI 33176	
******************	*******
Having been named as registered agent to accept service of process for the above stated corporation	
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this	s capacity

2/22/04 Date

Signature/Registered Agent

Signature/Incorporator