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(Requester's Name)

Kim Curtis
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St. Petersburg, FL 33703

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

11/17/04
SA

TRANSMITTAL LETTER

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

SUBJECT: BAY AREA CONCIERGE, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$78.75

FROM: KIMBERLY CURTIS
5520 PINE CIRCLE N.E.
ST. PETERSBURG, FL 33703

ARTICLES OF INCORPORATION

BAY AREA CONCIERGE, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

The name of the corporation is:

BAY AREA CONCIERGE, INC.

ARTICLES II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLES III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLES IV - CAPITAL STOCK

The corporation is authorized to issue one hundred shares (100) of one Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME KIMBERLY CURTIS

ADDRESS 5520 PINE CIRCLE N.E.

CITY ST. PETERSBURG, FL 33703

The name and street address of the Initial Registered Agent of this Corporation is:

NAME KIMBERLY CURTIS

ADDRESS 5520 PINE CIRCLE N.E.

CITY ST. PETERSBURG, FL 33703

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ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME KIMBERLY CURTIS

ADDRESS 5520 PINE CIRCLE N.E.

CITY ST. PETERSBURG STATE FL ZIP 33703

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

ARTICLE VII - INCORPORATIONS

The name(s) and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME KIMBERLY CURTIS

ADDRESS 5520 PINE CIRCLE N.E.

CITY ST. PETERSBURG STATE FL ZIP 33703

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 8 day of November, 2004.

_____(Seal)

_____(Seal)

_____(Seal)

STATE OF FLORIDA

COUNTY OF Pinellas

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 8 day of November, 2004.

Cynthia Szabries (Notary Seal)
(Notary Public, State of Florida at Large)

My Commission expires:



Cynthia D. Szabries
Commission # CC 991639
Expires Jan. 2, 2003
Bonded Thru
Atlantic Bonding Co., Inc.

**CERTIFICATE AND ACKNOWLEDGMENT
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

BAY AREA CONCIERGE, INC.

(name of corporation)

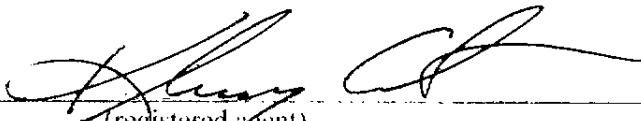
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Corporation

at 5520 PINE CIRCLE N.E.
ST. PETERSBURG, FL 33703
has named KIMBERLY CURTIS

located at the aforesaid address, as its Registered Agent, to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.


(registered agent)