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(Requestor's Name)

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(Address)

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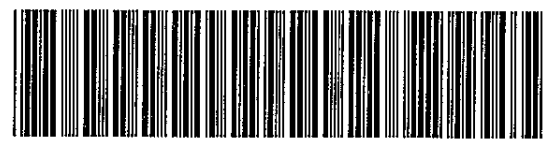
(Business Entity Name)

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SEVEN HILLS STATE
TALLAHASSEE, FLORIDA

4/7/05

TRANSMITTAL LETTER

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

SUBJECT: Tropical Trails Realty Fl, Inc
(Proposed corporate name - must include suffix)

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

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$122.50	<input checked="" type="checkbox"/> \$131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate

FROM: Alvin K. Grant
Name (Printed or typed)
507 Huron Place
Address
West Palm Beach, Florida 33409
City, State & Zip
(561) 640-3820
Daytime Telephone number

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

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**ARTICLE OF INCORPORATION
OF**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Tropical Trails Realty Fl, Inc.

We, the undersigned, for the purpose of forming a corporation under the laws of the State of Florida as the same may from time to time exist, hereby certify as follows :

ARTICLE 1. NAME

**The name of this Corporation is
Tropical Trails Realty Fl, Inc.**

ARTICLE 11. PRINCIPAL OFFICE

- a) The initial physical street address of the office of this Corporation in the State of Florida is
3017 Exchange Ct., Suite I
West Palm Beach, Florida 33409**
- b) The mailing address of this Corporation is
3017 Exchange Ct., Suite I
West Palm Beach, Florida 33409**

ARTICLE 111. NATURE OF BUSINESS

The general nature of the business to be conducted by this Corporation, together with its powers and purposes are as Follows, to – wit :

- a) Real Estate Sales**
- b) Real Estate Rental & Management**

ARTICLE 1V. DIRECTORS

The affairs of this corporation shall be managed by its Stockholders and Directors in the manner provided by the by-laws and in conformance with applicable Florida Statutes

ARTICLE VI. CAPITAL STOCK

1. The number of shares of capital stock of this Corporation is 100 shares and the stated or par value of each share of these common shares of stock shall be Five Dollar (\$5.00).

ARTICLE V. SUBSCRIBERS

1. The name and address of the subscribers of these Articles of Incorporation, the number of shares of stocks, and the value of the consideration thereof is :

Name	Address	No of Shares	Value per Share
1. Alvin K. Grant	507 Huron Place West Palm Beach Florida 33409	65	\$5
2. Beryl W. Grant	507 Huron Place West Palm Beach Florida, 33409	35	\$5

ARTICLE VI. REGISTERED AGENT

3. The Registered Agent of this Corporation is
Alvin K. Grant
507 Huron Place
West Palm Beach, Florida 33409

ARTICLE V11. INCORPORATOR

The name and address of the Incorporator is :

**Alvin K. Grant
507 Huron Place
West Palm Beach, Florida 33409**

ARTICLE V111. MISCELLANEOUS

a) These Articles of Incorporation may be amended in the manner provided by the by-laws and in accordance with the provisions of the applicable state laws.

b) The corporation is to exist perpetually.

In consent to the terms and conditions above, We have hereto set our hands and seal this 31 day of March, 2005.

Alvin K. Grant

Alvin K. Grant
President

Beryl W. Grant

Beryl W. Grant

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

Before me, a Notary Public, duly authorized in the State and County named above to take acknowledgements, personally appeared before me Alvin K. Grant, the person described as Officer in and who executed the foregoing Articles of Incorporation and acknowledged before me that he executed and subscribed to these Articles of Incorporation dated 31 day of March, 2005.



Careya Robinson

Notary Public
State Of Florida.

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Tropical Trails Realty Fl, Inc

2. The name and address of the registered agent and office is:

Alvin K. Grant
(NAME)

507 Huron Place
(P.O. BOX NOT ACCEPTABLE)

West Palm Beach, Florida 33409
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

SIGNATURE Alvin K Grant
(corporate officer)
TITLE President
DATE 3/31/2005

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 I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Alvin K Grant
DATE 3/31/2005