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DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: BLACKROCK PROPERTIES, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: LYNN F. WEST
Name (Printed or typed)
95023 FOREHAND WAY
Address
YULEE, FL 32097
City, State & Zip
904-583-5969
Daytime Telephone number
WestGardens@aol.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: BLACKROCK PROPERTIES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

95023 FOREHAND WAY

YULEE, FL 32097

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: RENTAL OF REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 600

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LYNN F. WEST, PRESIDENT

Name and Title: _____

Address 95023 FOREHAND WAY

Address: _____

YULEE, FL 32097

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: LYNN F. WEST
Address: 95023 FOREHAND WAY
YULEE, FL 32097

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: LYNN F. WEST
Address: 95023 FOREHAND WAY
YULEE, FL

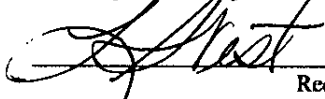
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

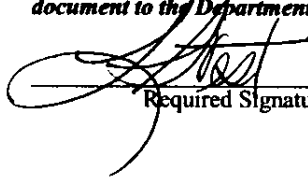


Required Signature/Registered Agent

APRIL 25, 2016

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

APRIL 25, 2016

Date

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