

P98000/02868

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Bay Area Recovery, Inc.

500002692755--3
-11/20/98--01062--010
****122.50 ****78.75

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of 122.50.

This represents the cost of the Charter Tax, Filing Fee, Certified Copy of Articles of Incorporation and Filing Fee for Registered Agent Certificate for the above named corporation.

Please be advised that this name will be available on or about 11-17-98, and request filing at that time of name availability.

Very truly yours,



Kevin J. Sarro

Please mail certified copy to:

Bay Area Recovery, Inc.

P.O. Box 260502

Tampa, FL 33685

FILED
98 DEC -9 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W98-26494
02555



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 24, 1998

KEVIN J. SARRO
BAY AREA RECOVERY, INC.
P.O. BOX 260502
TAMPA, FL 33685

SUBJECT: BAY AREA RECOVERY, INC.
Ref. Number: W98000026494

We have received your document for BAY AREA RECOVERY, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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) 487-6925.

Barbara Brock
Document Specialist

Letter Number: 398A00056321

ARTICLES OF INCORPORATION

OF

Bay Area Recovery, Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I-NAME

The name of the corporation shall be: Bay Area Recovery, Inc.

The principle place of business of this corporation shall be:

Mailing Address

P.O.Box 260502
Tampa, Fl 33685

Physical Address

4808 N. Manhattan
Tampa, Fl 33614

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ARTICLE II-NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III-CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is 10,000 all of which shall be Common shares with a non par value.

ARTICLE IV-TERM OF EXISTENCE

This corporation is to exist perpetually, unless dissolved according to Floirda law, commencing its existence upon the approval of the State.

ARTICLE V-OFFICERS DIRECTORS

The name and street address of the initial officer and director, if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is:

Kevin J. Sarro
4808 N. Manhattan Ave.
Tampa, Fl 33614
President/Secretary

David B. Dean
4808 N. Manhattan Ave.
Tampa, FL 33614
Vice President/Treasurer

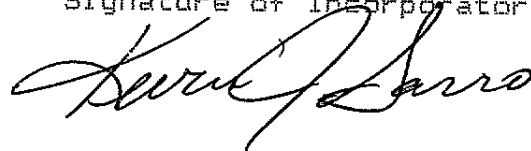
ARTICLE VI-INCORPORATORS

The name and street address of the incorporator to this articles of incorporation is:

Kevin J. Sarro
4808 N. Manhattan Ave.
Tampa, FL 33614

IN WITNESS WHEREOF, the undersigned incorporator has executed these
Articles of Incorporation this 11th day of November, 1998.

Signature of Incorporator

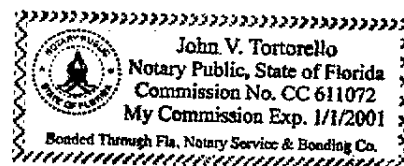
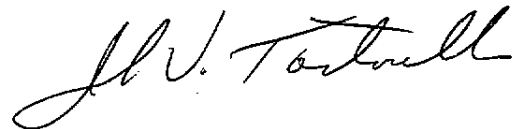


STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

THE foregoing instrument was acknowledged and sworn to before me this
11th day of November, 1998, by Kevin J. Sarro of Bay Area Recovery, Inc.
Personally known to me or provided as proof Florida Driver License.

Notary Public

My Commission Expires:



CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 0617.0501, 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: Bay Area Recovery, Inc.
2. The name and address of the registered agent and office is:

Christ P. Sarro
4808 N. Manhattan Ave.
Tampa, Fl 33614


SIGNATURE

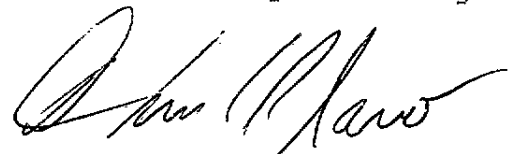
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TALLAHASSEE, FLORIDA

ACKNOWLEDGEMENT

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


11-11-98