

Secretary of State

Division of Business Services

312 Eighth Avenue North

6th Floor, William R. Snodgrass Tower

Nashville, Tennessee 37243

DATE: 04/20/06

REQUEST NUMBER: 5772-2383

TELEPHONE CONTACT: (615) 741-2286

FILE DATE/TIME: 04/20/06 0925

EFFECTIVE DATE/TIME: 04/20/06 0925

CONTROL NUMBER: 0518626

TO:
NATIONAL ASSOCIATION OF RESIDENTAL PROPE
217 JAMESTOWN PK RD.
SUITE 4
BRENTWOOD, TN 37027

RE:
NATIONAL ASSOCIATION OF RESIDENTAL PROPERTY MANAGERS, INC.
CHARTER - NONPROFIT

CONGRATULATIONS UPON THE INCORPORATION OF THE ABOVE ENTITY IN THE STATE OF TENNESSEE, WHICH IS EFFECTIVE AS INDICATED.

A CORPORATION ANNUAL REPORT MUST BE FILED WITH THE SECRETARY OF STATE ON OR BEFORE THE FIRST DAY OF THE FOURTH MONTH FOLLOWING THE CLOSE OF THE CORPORATION'S FISCAL YEAR. ONCE THE FISCAL YEAR HAS BEEN ESTABLISHED, PLEASE PROVIDE THIS OFFICE WITH THE WRITTEN NOTIFICATION. THIS OFFICE WILL MAIL THE REPORT DURING THE LAST MONTH OF SAID FISCAL YEAR TO THE CORPORATION AT THE ADDRESS OF ITS PRINCIPAL OFFICE OR TO A MAILING ADDRESS PROVIDED TO THIS OFFICE IN WRITING. FAILURE TO FILE THIS REPORT OR TO MAINTAIN A REGISTERED AGENT AND OFFICE WILL SUBJECT THE CORPORATION TO ADMINISTRATIVE DISSOLUTION.

WHEN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE CORPORATION CONTROL NUMBER GIVEN ABOVE. PLEASE BE ADVISED THAT THIS DOCUMENT MUST ALSO BE FILED IN THE OFFICE OF THE REGISTER OF DEEDS IN THE COUNTY WHEREIN A CORPORATION HAS ITS PRINCIPAL OFFICE IF SUCH PRINCIPAL OFFICE IS IN TENNESSEE.

State of Tennessee



Department of State
Corporate Filings
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243

CHARTER (Nonprofit Corporation)

For Office Use Only

FILED

SECRETARY OF STATE
2006 APR 20 AM 9:25
STATE OF TENNESSEE

5772.2383

The undersigned acting as incorporator(s) of a nonprofit corporation under the Tennessee Nonprofit Corporation Act adopts the following Articles of Incorporation.

1. The name of the corporation is: National Association of Residential Property Managers, Inc.

2. Please complete all of the following sentences by checking one of the two boxes in each sentence:

This corporation is a public benefit corporation / mutual benefit corporation.

This corporation is a religious corporation / not a religious corporation.

This corporation will have members / not have members.

3. The name and complete address of the corporation's initial registered agent and office in Tennessee is: Williamson
Jon Selinger 217 Jamestown Park Rd., Suite 4, Brentwood TN 37027
Name Street Address City State, Zip Code County

4. List the name and complete address of each incorporator:

K. Thomas Sidwell 121 1st Ave. South, Suite 200, Franklin, TN 37064
Name (Include Street Address, City, State, and Zip Code)

Name (Include Street Address, City, State, and Zip Code)

Name (Include Street Address, City, State, and Zip Code)

5. The complete address of the corporation's principal office is:

217 Jamestown Park Rd., Suite 4, Brentwood, TN / Williason Co. 37027
Street Address City State/Country Zip Code

6. The corporation is not for profit.

7. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date and time are:

Date _____, _____, Time _____ (Not to exceed 90 days.)

8. Insert here the provisions regarding the distribution of assets upon dissolution:

Upon dissolution all assets will be distributed to the members of the Corporation.

9. Other provisions:

Signature Date

4/14/06

Incorporator's Signature

K. Thomas Sidwell

Incorporator's Name (typed or printed)