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FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ PHONE: (305)599-0839

FAX #: (305)716-0346

VAME: LIFE EXTENSIONS HEALTH CENTER, INC.

AUDIT NUMBER...... H98000001580

DOC TYPE......FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0 CERT. COPIES.....1

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ARTICLES OF INCORPORATION

LIFE EXTENSIONS HEALTH CENTER, INCALLAHASSEE, FLORIDA The undersigned incorporator(s): for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE J NAME

The name of the corporation shall be: LIFE EXTENSIONS HEALTH CENTER, INC.

The principal place of business of this corporation shall be: 15200 5. US NI, Ste#117, Ft Myers, FC. 33908

ARTICLE IL 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 IILCAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time 15: 1,000 shares -- Par Value \$1.00

ARTICLE IV TERM OF EXISTENCE This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

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

President/Director Robert D. Peters, A.P. 17460 Fuchia FL Myers, FI. 33912

Treasurer/Director Dennis E, Peters, D.C. 69 Camelia Dr. Ft. Myers, FL 33908

Vice President/Director Rasheed A. Awan, D.O. 3417 Winkler Ave, #602 Ft. Myers, FL. 33916

Secretary/Director Jeffrey Book, D.O., P.A. 1786 Whiskey Creek Dr. Pt, Myers, FL 33919

Vice President/Director Jonathan R. Kob, D.O. 501 Peck Avu. Ft Mycrs, FL 33919

PREPARED BY: ED McBRIDE 15200 S. US 41,STE#117 FT.MYERS,FL 33908 (941)489-0800

ARTICLE VI INCORPORATORISI

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

President/Director Robert D. Peters, A.P. 17460 Fuchia

17460 Fuchia Fl. Myers, FL 33912 Treasurer/Director Dennis E. Peters, D.C.

69 Camelia Dr. Fl. Myers, FL 33908 Vice President/Director Rasheed A. Awan, D.O. 3417 Winkler Ave, #602 Ft. Myors, FL 33916

Secretary/Director Jeffrey Book, D.O., P.A. 1786 Whiskey Creek Dr. Ft. Myers, FL 33919 Vice President/Director Jenathan R. Kob, D.O. 501 Peck Ave. I't. Myers, FL 33919

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 2th day of January, 1998

Signature(s) of incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:
Life Extensions Health Center, Inc.
2. The name and address of the registered agent and office is:
Col Me Bride 15200 5. US. NI. Stet 117
(P.O. BOX NOT ACCEPTABLE)
Et. Myers, EL- 33908
(CITY/STATE/ZIP)
SIGNATURE AM Buste

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

DATE 1-8-98