

ARTICLES OF INCORPORATION
OF
LIFE WAVE 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:

LIFE WAVE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

676 W PROSPECT RD
FT LAUDERDALE, FL 33309

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 SHARES @ \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the registered agent is:


HAI GAI
676 W PROSPECT RD
FT LAUDERDALE, FL 33309

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

HAI GAI
676 W PROSPECT RD
FT LAUDERDALE, FL 33309

The undersigned has (have) executed these Articles of Incorporation this/① day of JUNE, 1999.

 OWNER 06/10/99
SIGNATURE & TITLE DATE

FILED
99 JUN 14 AM 9:29
SECRETARY OF STATE
TALLAHASSEE 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:

LIFE WAVE INC

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

HAI GAI
676 W PROSPECT RD
FT LAUDERDALE, FL 33309

X 
SIGNATURE
(corporate officer)

TITLE OWNER

DATE 06/10/99

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE NAMED 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.

X 
SIGNATURE

DATE 06/10/99

FILED
JUN 14 AM 9:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

REGISTERED AGENT FILING FEE: \$35.00