CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (85.) 22. 3870 • 1-800-342-8062 • Fax (850) 222-1222

Signature

Name

Requested by:

Walk-In _____

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CERTIFICATE OF INCORPORATION -of-

ANTI-AGING FOCUS GROUP, INC.

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts following Articles of Incorporation:

ARTICLE I. NAME

The name of the corporation is ANTI-AGING FOCUS GROUP, INC.

ARTICLE II. DURATION

The term of existence of the corporation is perpetual.

ARTICLE III. PURPOSE

The corporation may transact any and all lawful business for which corporations may be incorporated under the Florida General Corporation Act.

ARTICLE IV. CAPITAL STOCK

The aggregate number of shares which the corporation has authority to issue is 1,000,000 all of which shall be common shares with par value of \$.01.

ARTICLE V. REGISTERED OFFICE

The street address of the initial registered office of the corporation is 2677 FOREST HILL BLVD., #102, WEST PALM BEACH, PALM BEACH COUNTY, FLORIDA 33406, and the name of the initial registered agent is FRANCIS PHELPS III.

ARTICLE VI. DIRECTORS

The Board of Directors of the corporation shall consist of THREE members but may be increased or decreased by a resolution of the Board of Directors adopted in the manner provided in the Bylaws of the corporation, provided that in no event shall the Board of Directors consist of less than one member.

The names and addresses of the Directors which constitute the first Board of Directors of the Corporation are:

NAME FRANCIS PHELPS III

ADDRESS 2677 FOREST HILL BLVD. #102 WEST PALM BEACH, FL. 33406

STATE OF FLORIDA SECRETARY OF STATE

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served and Names and Addresses of the Officers and Directors.

ANTI-AGING FOCUS GROUP, INC.

The following is submitted, in compliance with Chapter 48.091, Florida Statutes:

ANTI-AGING FOCUS GROUP, INC., a corporation organized under the laws of the State of Florida, with its principal office at 2677 FOREST HILL BLVD., #102, WEST PALM BEACH, PALM BEACH COUNTY, FLORIDA, 33406, has named FRANCIS PHELPS, III, located at 2677 FOREST HILL BLVD., #102, WEST PALM BEACH, PALM BEACH COUNTY, FLORIDA, 33406, as its agent to accept service of process within this state.

<u>OFFICERS</u>	TITLES	SPECIFIC ADDRESS
FRANCIS PHELPS III	PRES/SEC.	2677 FOREST HILL BLVD.#102 WEST PALM BEACH, FL.33406
JOANN MAROTTA	VICE-PRES/TREAS.	. 20871 N.W. 2 ND STREET PEMBROKE PINES, FL 33029
<u>DIRECTORS</u>		
FRANCIS PHELPS III	PRES/SEC.	2677 FOREST HÏLL BLVD.#102 WEST PALM BEACH, FL.33406
JOANN MAROTTA	VICE-PRES/TREAS.	20871 N.W. 2 ND STREET PEMBROKE PINES, FL 33029

ACCEPTANCE

I agree as Resident Agent to accept Service of Process: to keep the office open during prescribed hours: to post my name (and any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in the office as required by law.

DATED: AUGUST _____, 2000

FRANCIS PHELPS III

JOANN MAROTTA

20871 N.W. 2ND STREET PEMBROKE PINES, FL 33029

JEROME WATERS

237 N.E. 33RD ROAD MIAMI, FL. 3313 ZARRANI ANY CATORS

ARTICLE VII. INCORPORATORS

The name and address of the incorporator of the corporation are:

: §

NAME

ADDRESS

FRANCIS PHELPS III

2677 FOREST HILL BLVD. #102 WEST PALM BEACH, FL. 33406

IN WITNESS WHEREOF, the undersigned has subscribed his name this August _ \$\mathbb{Z}_, 2000.

FRANCIS PHELPS III

STATE OF FLORIDA

COUNTY OF PALM BEACH

 \mathscr{S} , 2000, before me, the undersigned officer, personally appeared FRANCIS PHELPS III, who is personally known to me to be the person who executed the foregoing, and he took an oath, and he acknowledged that he executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Name:
Notary Public,
at Large
Commission Expires:
My Commission Expires:

My Commission Expires:

My Commission Expires:

My Commission For State of Plonde of Plonde

Nótary Public, State of Florida,