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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	<i>≑#</i>)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:]
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Transmittal Letter

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Subject: Share Life Ltd. Co.

The enclosed two copies of the Articles of Organization, the filing fee for the Articles of Organization of \$100 and the Designation of Registered Agent fee of \$25 are being submitted for filing and processing.

Please stamp one copy of the Articles of Organization with the filing date and time of acceptance and return to me with all correspondence concerning this matter to:

Easter Asis

Share Life Ltd. Co.

5537 Lehigh Avenue Unit 9A

Orlando, Florida 32807

If you need additional information please call:

407-381-0077

easterasis@msn.com

Thank You,

Easter Asis
//8/04

Articles of Organization Share Life Ltd. Co., A Florida Limited Liability Company

Article I - Name:

The name of this Limited Liability Company is Share Life Ltd. Co.

Article II - Address:

The mailing address and the street address of the principal office of the Limited Liability Company are:

5537 Lehigh Avenue, Unit 9A

Orlando, Florida 32807

Article III - Registered Agent, Registered Office and Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name:

Easter Asis

Florida Street Address:

5537 Lehigh Avenue, Unit 9A

City, State and Zip

Orlando, Florida 32807

Having been named as registered agent and to accept service of process for the above limited liability company 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 as provided in Chapter 608, F.S.

Easter Asis

Registered Agent's Signature

Article IV - Manger(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Managing Member

Easter Asis

5537Lehigh Avenue, Unit 9A

Orlando, Florida 32807

Required Signature:

Easter Asis

The signature of a member or an authorized representative of a member.

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Easter Asis

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