2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F97000004311

Entity Name: LIFE SERA, INC.

FILED Oct 08, 2007 Secretary of State

736 PARK NORTH BLVD.

SUITE 100

CLARKSTON, GA 30021 US

Current Mailing Address: New Mailing Address:

736 PARK NORTH BLVD.

SUITE 100

CLARKSTON, GA 30021 US

FEI Number: 58-2142226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM NRAI SERVICES, INC

1200 SOUTH PINE ISLAND ROAD 2731 EXECUTIVE PARK DRIVE, SUITE 4

PLANTATION, FL 33324 US WESTON, FL 33331 U

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARY PARIS 10/08/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MANUSU, JOHN Name: Name: RUESSELER, WOLFGANG 736 PARK NORTH BLVD, SUITE 100 736 PARK NORTH BLVD, SUITE 100 Address: Address: City-St-Zip: CLARKSTON, GA 30021 US City-St-Zip: CLARKSTON, GA 30021 US

Title: CEOD () Delete Title: () Change () Addition

 Name:
 NAIR, D HARI DR
 Name:

 Address:
 736 PARK NORTH BLVD, SUITE 100
 Address:

 City-St-Zip:
 CLARKSTON, GA 30021 US
 City-St-Zip:

Title: PSD () Delete Title: CFO (X) Change () Addition

Name: RUESSELER, WOLFGANG DR Name: SARDA, SUBHASH C

Address: 736 PARK NORTH BLVD, SUITE 100 Address: 736 PARK NORTH BLVD, SUITE 100

City-St-Zip: CLARKSTON, GA 30021 US City-St-Zip: CLARKSTON, GA 30021

Title: VP (X) Delete Title: () Change () Addition

 Name:
 TOLMAN, CYNTHIA R
 Name:

 Address:
 736 PARK NORTH BLVD, SUITE 100
 Address:

 City-St-Zip:
 CLARKSTON, GA 30021
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. HARI NAIR CEO 10/08/2007