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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 Phone : (800)494-3124 Fax Number : (561)455-9885

FLORIDA/FOREIGN LIMITED LIABILITY CO.

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Quality of Life Properties LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: Quality of Life Properties LLC

ARTICLE II ADDRESS

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

5550 NW 5TH CT MIAMI, FLORIDA 33127

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

APOSTLE SOLOMON III 5550 NW 5TH CT MIAMI, FLORIDA 33127

Having been named as registered agent to accept service of process for the above stated 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 complywith 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 for in Chapter 608, F.S..

Apostle Solomon III/ Registered Agent's signature

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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Quality of Life properties LLC

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

APOSTLE SOLOMON III 5550 NW 5TH CT MIAMI, FLORIDA 33127

MANAGING MEMBER:

TODDRA SOLOMON 5550 NW 5TH CT MIAMI, FLORIDA 33127 DIVISION OF CORPORATIONS

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.

Apostle Solomon III

Typed or printed name of signee